

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000016237

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SCHON THOMAS - SHINE & GLOSS LLC

**Current Principal Place of Business:**

3410 DALE STREET  
FORT MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 50815  
FORT MYERS, FL 33994

**New Mailing Address:**

**FEI Number:** 27-4823583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THOMAS, SCHON  
3410 DALE STREET  
FORT MYERS, FL 33916 US

**Name and Address of New Registered Agent:**

CARR, ADRIANNE E  
2227 FOWLER STREET  
FORT MYERS, FL 33901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADRIANNE E CARR

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: THOMAS, SCHON  
Address: 3410 DALE STREET  
City-St-Zip: FORT MYERS, FL 33916

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SCHON THOMAS

MGR

04/30/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date