

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000047594

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** NORTH SHORE IMPORTS, L.L.C.

**Current Principal Place of Business:**

4320 INDEPENDENCE COURT  
SARASOTA, FL 34234

**New Principal Place of Business:**

**Current Mailing Address:**

24 ROGERS ROAD  
HAVERHILL, MA 01835

**New Mailing Address:**

4320 INDEPENDENCE COURT  
SARASOTA, FL 34234

**FEI Number:** 01-0569662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS C. TYLER, JR. P.A.  
735 E VENICE AVENUE  
SUITE 200  
VENICE, FL 34285 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** WALCKER, WOLFGANG  
**Address:** 1935 GULF OF MEXICO DR., UNIT#211  
**City-St-Zip:** LONGBOAT KEY, FL 34228

**Title:** MGRM  
**Name:** WALCKER, DOLORES  
**Address:** 1935 GULF OF MEXICO DR., UNIT#211  
**City-St-Zip:** LONGBOAT KEY, FL 34228

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:** WOLFGANG WALCKER

MGRM

01/06/2012

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