

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000962

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: SHULA SPORTS, LLC

**Current Principal Place of Business:**

10805 INDIAN TRAIL  
COOPER CITY, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

10805 INDIAN TRAIL  
COOPER CITY, FL 33328

**New Mailing Address:**

FEI Number: 65-0847837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WATTS-FITZGERALD, ABIGAIL  
1111 BRICKELL AVENUE  
SUITE 2500  
MIAMI, FL 33131 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: MGR ( ) Delete  
Name: SHULA, DAVE  
Address: 1080 INDIAN TRAIL  
City-St-Zip: COOPER CITY, FL 33328

Title: MGR ( ) Delete  
Name: SHULA, MARY ANNE  
Address: 16 INDIAN CREEK ISLAND  
City-St-Zip: MIAMI BEACH, FL 33154

Title: MGR ( ) Delete  
Name: SHULA, DONALD  
Address: 16 INDIAN CREEK ISLAND  
City-St-Zip: MIAMI BEACH, FL 33154

Title: MGR ( ) Delete  
Name: PEACE, JOHN  
Address: 425 WEST CAPITAL SUITE 3700  
City-St-Zip: LITTLE ROCK, AR 72201

Title: MGR ( ) Delete  
Name: CHILDRESS, ROBERT  
Address: 425 WEST CAPITOL SUITE 3300  
City-St-Zip: LITTLE ROCK, AR 72201

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DAVE SHULA

MGR

04/29/2009

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