

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 23, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M03000000382**

1. Entity Name

LITTLE ME RETAIL STORES OF ORLANDO, FLORIDA  
LLC



Principal Place of Business

8200 VINELAND AVE  
SUITE 1143  
ORLANDO, FL 32821

Mailing Address

12101 UPPER POTMAC INDUSTRIAL PARK  
CUMBERLAND, MD 21502



01032007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

52-2267000

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD., STE. 101  
TALLAHASSEE, FL 32301-2960

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	LITTLE ME RETAIL STORES LLC
STREET ADDRESS	12101 UPPER POTMAC INDUSTRIAL PARK
CITY-ST-ZIP	CUMBERLAND, MD 21502

TITLE	CEO
NAME	SCHWAB, SAMUEL C
STREET ADDRESS	44 WEST 77TH STREET APT 10W
CITY-ST-ZIP	NEW YORK, NY 10024

TITLE	VPS
NAME	SCHWAB, DOUGLAS S
STREET ADDRESS	835 MACDONALD TERRACE
CITY-ST-ZIP	CUMBERLAND, MD 21502

TITLE	VPF
NAME	STUART, RONALD W
STREET ADDRESS	P.O. BOX 238
CITY-ST-ZIP	DAVIS, WV 26260

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

*Ronald W. Stuart*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #