

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000004233

Entity Name: GAIL'S GEMS, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

376 CYPRESS WAY WEST  
NAPLES, FL 34110

**New Principal Place of Business:**

4025 STOW WAY  
NAPLES, FL 34116

**Current Mailing Address:**

376 CYPRESS WAY WEST  
NAPLES, FL 34110

**New Mailing Address:**

4025 STOW WAY  
NAPLES, FL 34116

FEI Number: 38-3619983

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

THOMPSON, GAIL  
376 CYPRESS WAY WEST  
NAPLES, FL 34110 US

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

THOMPSON, GAIL  
4025 STOW WAY  
NAPLES, FL 34116 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: \_\_\_\_\_

01/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: THOMPSON, GAIL  
Address: 4025 STOW WAY  
City-St-Zip: NAPLES, FL 34116

Title: MGR  
Name: EDWARD, THOMPSON F  
Address: 4025 STOW WAY  
City-St-Zip: NAPLES, FL 34116

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: GAIL THOMPSON

PRES

01/05/2012

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