

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000003375

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** SHELTON PROPERTIES PCB, LLC

**Current Principal Place of Business:**

18919 LONG GROVE WAY  
LOUISVILLE, KY 40245

**New Principal Place of Business:**

**Current Mailing Address:**

18919 LONG GROVE WAY  
LOUISVILLE, KY 40245

**New Mailing Address:**

**FEI Number:** 61-1355418

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHELTON, KAREN M  
9450 S. THOMAS DRIVE UNIT #1604  
PANAMA CITY BEACH, FL 32408 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:** SHELTON, KAREN M  
**Address:** 18919 LONG GROVE WAY  
**City-St-Zip:** LOUISVILLE, KY 40245

**Title:** MGRM  
**Name:** SHELTON, KURT  
**Address:** 18919 LONG GROVE WAY  
**City-St-Zip:** LOUISVILLE, KY 40245

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:** KAREN SHELTON, MANAGING MEMBER

MGRM

02/17/2010

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