

**2009 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000002772 1. Entity Name WEALTH ADVISORS, LLC	
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Principal Place of Business 101 W. VENICE AVE STE 31-8 VENICE, FL 34285	Mailing Address 101 W. VENICE AVE STE 31-8 VENICE, FL 34285
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DO NOT WRITE IN THIS SPACE

FILED
09 APR 14 PM 12:11
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



04022009 No Chg-LLC CR2E083 (11/08)

4. FEI Number 80-0036160	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**STELLWAGEN, GERARD F
1077 RUISDEL CIR
NOKOMIS, FL 34275**

**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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2009 Fee will be \$538.75**

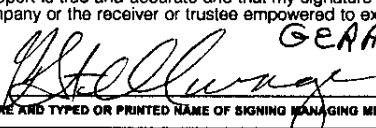
04/15/09--01001--025 **138.75
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04/15/09--01001--025 **138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STELLWAGEN, GERARD F 1077 RUISDAEL CIR NOKOMIS, FL 34275
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IN THIS SPACE**

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:  **GERARD F STELLWAGEN**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date **4/2/09** Daytime Phone # **941-485-2990**