

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000053380

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: WELLINGTON PIERCE HOLDINGS, LLC

**Current Principal Place of Business:**

705 WEST SR 434  
SUITE D  
LONGWOOD, FL 32750

**New Principal Place of Business:**

1827 WEST SR 434  
LONGWOOD, FL 32750

**Current Mailing Address:**

705 WEST SR 434  
SUITE D  
LONGWOOD, FL 32750

**New Mailing Address:**

1827 WEST SR 434  
LONGWOOD, FL 32750

FEI Number: 20-4913143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VOCCIA, DAN  
370 CENTER POINT CIRCLE STE 1154  
ALTAMONTE SPRINGS, FL 32701 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: P ( ) Delete  
Name: PIZZUTI, RICHARD A  
Address: 5380 DEEPWOODS COURT  
City-St-Zip: SANFORD, FL 32771

Title: S ( ) Delete  
Name: PIZZUTI, SHARON L  
Address: 5380 DEEPWOODS COURT  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES:**

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: SHARON L PIZZUTI

MGRM

04/30/2009

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