

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019691

Entity Name: THE NADOLNY FAMILY, LLC

FILED  
Jan 31, 2009  
Secretary of State

**Current Principal Place of Business:**

2774 N. RIVERSIDE DRIVE  
INDIATLANTIC, FL 32903

**New Principal Place of Business:**

2774 N. RIVERSIDE DRIVE  
INDIATLANTIC, FL 32903 US

**Current Mailing Address:**

2774 N. RIVERSIDE DRIVE  
INDIATLANTIC, FL 32903

**New Mailing Address:**

2774 N. RIVERSIDE DRIVE  
INDIATLANTIC, FL 32903 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

MOULE, REX E ESQ  
440 SOUTH BABCOCK STREET  
MELBOURNE, FL 32901 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 ( ) Delete  
Name: NADOLNY, DIANE D  
Address: 2774 N. RIVERSIDE DRIVE  
City-St-Zip: INDIATLANTIC, FL 32903

**ADDITIONS/CHANGES:**

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: DIANE D NADOLNY

MRS

01/31/2009

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