2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L03000002976

Entity Name: OSWALD ASSET MANAGEMENT, LLC

Current Principal Place of Business:

2660 MEGAN CT
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

2660 MEGN CT
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 20-0857599 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JAMES L. CLARKS, PA.
701 SOUTH HOWARD AVENUE
SUITE 201
TAMPA, FL 33606 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: JAUFMANN, JR., EDWIN J MR
Address: 2660 MEGAN CT
City-St-Zip: PALM HARBOR, FL 34684

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: JAUFMANN, JR., EDWIN J MR
Address: 2660 MEGAN CT
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR ( ) Change (X) Addition
Name: HARTNEY, GREGORY T MR.
Address: 2660 MEGAN COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR ( ) Change (X) Addition
Name: FOERDERER, ALICE M MS.
Address: 2660 MEGAN COURT
City-St-Zip: PALM HARBOR, FL 34684

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: EDWIN J. JAUFMANN, JR. MGR 04/30/2009

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