

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011977

FILED
Jan 14, 2009
Secretary of State

Entity Name: WIGODA ALTON ROAD, LLC

Current Principal Place of Business:

9601 COLLINS AVENUE #406
BAL HARBOR, FL 33154

New Principal Place of Business:

9601 COLLINS AVENUE #406
#406
BAL HARBOR, FL 33154

Current Mailing Address:

9601 COLLINS AVENUE #406
BAL HARBOR, FL 33154

New Mailing Address:

9601 COLLINS AVENUE #406
\$406
BAL HARBOR, FL 33154

FEI Number: 20-0918245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORNSTEIN, BRUCE
317-71ST STREET
MIAMI BEACH, FL 33141 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: MGR () Delete
Name: WIGODA, GINA
Address: 9601 COLLINS AVENUE STE 406
City-St-Zip: BAL HARBOUR, FL 33154

Title: MGR () Delete
Name: WIGODA, PAUL
Address: 9601 COLLINS AVENUE STE 406
City-St-Zip: BAL HARBOUR, FL 33154

Title: MGR () Delete
Name: WIGODA, PATRICIA
Address: 9601 COLLINS AVENUE STE 406
City-St-Zip: BAL HARBOUR, FL 33154

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDITH WIGODA

PRES

01/14/2009

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