## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000023478

City-St-Zip:

BOCA RATON, FL 33434 US

Entity Name: MASTRANGELO FELICIONE, LLC

FILED Jan 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12325 EQUINE LANE WELLINGTON, FL 33414 US **Current Mailing Address: New Mailing Address:** 12325 EQUINE LANE WELLINGTON, FL 33414 US FEI Number: 20-0060621 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MASTRANGELO, FILOMENA MGRM 12325 EQUINE LÂNE WELLINGTON, FL 33414 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MASTRANGELO, FILOMENA MGRM Name: Name: Address: 12325 EQUINE LANE Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MASTRANGELO, CARMELO MGRM Name: Address: 12325 EQUINE LANE Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FELICIONE, HILDA MGRM Name: Name: Address: 8518 EAGLE RUN DRIVE Address:

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.

City-St-Zip:

SIGNATURE: FILOMENA MASTRANGELO MGRM 01/12/2009