

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038985

FILED
Apr 30, 2007
Secretary of State

Entity Name: PENDE, LLC

Current Principal Place of Business:

1964 BAYWOOD TERRACE
SARASOTA, FL 34231 US

New Principal Place of Business:

1858 OAK STREET
SARASOTA, FL 34236 US

Current Mailing Address:

1964 BAYWOOD TERRACE
SARASOTA, FL 34231 US

New Mailing Address:

1858 OAK STREET
SARASOTA, FL 34236 US

FEI Number: 20-0306962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANG, MICHAEL D
1964 BAYWOOD TERRACE
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

LANG, MICHAEL D
1858 OAK STREET
SARASOTA, FL 34236 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: MICHAEL D. LANG

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LANG, ANNE-MARIE G
Address: 1964 BAYWOOD TERRACE
City-St-Zip: SARASOTA, FL 34231 US

Title: MGRM () Delete
Name: LANG, MICHAEL D
Address: 1964 BAYWOOD TERRACE
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANG, ANNE-MARIE G
Address: 1858 OAK STREET
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM (X) Change () Addition
Name: LANG, MICHAEL D
Address: 1858 OAK STREET
City-St-Zip: SARASOTA, FL 34236 US

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: MICHAEL D. LANG

MGRM

04/30/2007

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