

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000039882

Entity Name: WOLVERINE PUMPS, LLC

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

3671 PUTTER POINT LANE  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

3671 PUTTER POINT LANE  
FORT MYERS, FL 33919

**New Mailing Address:**

FEI Number: 56-2407002

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WANDERON, THOMAS  
868 106TH AVE. NORTH  
NAPLES, FL 34108 US

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

KATZ, DANIEL  
3671 PUTTER POINT LANE  
FORT MYERS, FL 33919 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: D KATZ

04/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KATZ, DANIEL M  
Address: 3671 PUTTER POINT LANE  
City-St-Zip: FORT MYERS, FL 33919

**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: D KATZ

P

04/30/2007

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