

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000014234

Entity Name: LOUIS E. WOLFE, LLC

FILED
Jul 15, 2009
Secretary of State

Current Principal Place of Business:

1281 GULF OF MEXICO DRIVE, #304
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

1281 GULF OF MEXICO DRIVE, #304
LONGBOAT KEY, FL 34228

New Mailing Address:

FEI Number: 90-0148569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELLS, ALYSSA M ESQ.
1515 RINGLING BLVD., STE. 840
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

WOLFE, ADAM M ESQ.
3120 W. OAKELLAR AVE
TAMPA, FL 33611 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: ADAM WOLFE

07/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WOLFE, LOUIS E
Address: 1281 GULF OF MEXICO DRIVE, #304
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WOLFE, ADAM W
Address: 3120 W. OAKELLAR AVE.
City-St-Zip: TAMPA, FL 33611

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: ADAM WOLFE

MGRM

07/15/2009

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