2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2009
Secretary of State

DOCUMENT# L04000025745

Entity Name: LAST CALL, L.L.C.

Current Principal Place of Business:

99 NESBIT STREET
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

114 DEL PRADO BLVD S
CAPE CORAL, FL 33990 US

Current Mailing Address:

C/O JACK O. HACKETT II, ESQUIRE
99 NESBIT STREET
PUNTA GORDA, FL 33950 US

New Mailing Address:

114 DEL PRADO BLVD S
CAPE CORAL, FL 33990 US

FEI Number: 20-1076131 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HACKETT, JACK O ESQUIRE
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: KELLY, DANIEL
Address: 4037 DEL PRADO BLVD. S
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MGR ( ) Delete
Name: HAAG, BRIAN
Address: 4037 DEL PRADO BLVD S.
City-St-Zip: CAPE CORAL, FL 33904 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: KELLY, DANIEL
Address: 114 DEL PRADO BLVD S
City-St-Zip: CAPE CORAL, FL 33990 US

Title: MGR (X) Change ( ) Addition
Name: HAAG, BRIAN
Address: 114 DEL PRADO BLVD S
City-St-Zip: CAPE CORAL, FL 33990 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: DANIEL KELLY MGR 01/21/2009

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