

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040785

Entity Name: WAGNER-ENGLEFIELD, LLC

FILED
Feb 18, 2008
Secretary of State

Current Principal Place of Business:

447 JAMES PARKWAY
HEATH, OH 43056

New Principal Place of Business:

Current Mailing Address:

447 JAMES PARKWAY
HEATH, OH 43056

New Mailing Address:

FEI Number: 55-0869923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFE, JOHN J
2955 OVERSEAS HIGHWAY
MARATHON, FL 33050 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: P () Delete
Name: ENGLEFIELD, F W III
Address: 447 JAMES PARKWAY
City-St-Zip: HEATH, OH 43056

Title: P () Delete
Name: ENGLEFIELD, F W IV
Address: 447 JAMES PARKWAY
City-St-Zip: HEATH, OH 43056

Title: P () Delete
Name: ENGLEFIELD, BENJAMIN B
Address: 447 JAMES PARKWAY
City-St-Zip: HEATH, OH 43056

Title: P () Delete
Name: WAGNER, KARL
Address: 447 JAMES PARKWAY
City-St-Zip: HEATH, OH 43056

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BENJAMIN ENGLEFIELD

P

02/18/2008

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