2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L04000068292

Entity Name: WEL, LC

Current Principal Place of Business:

1232 MARKET CIRCLE
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

1232 MARKET CIRCLE
PORT CHARLOTTE, FL 33953

New Mailing Address:

FEI Number: 20-1836705 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELM, WALTER PRES
17106 SEASHORE AVE
PORT CHARLOTTE, FL 33948 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: HELM, WALTER E
Address: 1232 MARKET CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: MGR ( ) Delete
Name: HELM, EILEEN
Address: 15 MILL ROAD
City-St-Zip: WOOLWICH, NJ 08085

Title: MGR ( ) Delete
Name: HELM, LINDA L
Address: 1232 MARKET CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33953

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:

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: LINDA HELM MGR 04/28/2009

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