

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020732

FILED
May 23, 2009
Secretary of State

Entity Name: RIGHT ANGLE PROPERTY, LLC

Current Principal Place of Business:

390 SE 2ND AVENUE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

540 NW 11TH AVENUE
BOCA RATON, FL 33486

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZSIMMONS, CORINNE E
540 NW 11TH AVEUE
BOCA RATON, FL 33486 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: MGRM () Delete
Name: WULF, DAVID B
Address: 540 NW 11TH AVENUE
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM () Delete
Name: WULF, GARY T
Address: 831 SE 4TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33483

Title: MGRM () Delete
Name: WULF, JAMES C
Address: 1106 SW 7TH STREET
City-St-Zip: BCOCA RATON, FL 33486

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: DAVID WULF

MGRM

05/23/2009

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