

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024832

FILED
Mar 19, 2009
Secretary of State

Entity Name: STUHLMAN ENTERPRISES LLC

Current Principal Place of Business:

1974 N. BRIDGE ST.
LABELLE, FL 33975

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1127
LA BELLE, FL 33975

New Mailing Address:

FEI Number: 20-2477737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUD, CHRISTOPHER
150 S MAIN ST
1
LABELLE, FL 33935 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: STUHLMAN, MIKE
Address: PO BOX 1127
City-St-Zip: LABELLE, FL 33975

Title: MGR () Delete
Name: STUHLMAN, ROBERT
Address: 1203 E.15TH ST
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: STUHLMAN, ROBERT
Address: 1007 SUNRISE BLVD
City-St-Zip: LEHIGH ACRES, FL 33974

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: ROBERT STUHLMAN

MGR

03/19/2009

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