

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000045540

Entity Name: LUDWIG BROTHERS, LLC

**FILED**  
**Jan 13, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

300 S. ORANGE AVENUE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 850  
SARASOTA, FL 34230

**New Mailing Address:**

FEI Number: 20-2820112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCGINNESS, W. LEE  
1800 SECOND STREET, SUITE 971  
SARASOTA, FL 34236 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: LUDWIG, ROBERT S  
Address: 1185 WESTERN PINE CIRCLE  
City-St-Zip: SARASOTA, FL 34240

Title: MGR ( ) Delete  
Name: LUDWIG, GERALD E III  
Address: 5728 BENT OAK DR.  
City-St-Zip: SARASOTA, FL 34232

**ADDITIONS/CHANGES:**

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: ROBERT S LUDWIG

MGR

01/13/2009

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