

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052219

FILED
Jan 14, 2008
Secretary of State

Entity Name: FINN AND FINN AT FIDDLESTICKS, LLC

Current Principal Place of Business:

13650 FIDDLESTICKS BLVD
SUITE 202
FT. MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

9134 PALM ISLAND CIRCLE
FT. MYERS, FL 33903 US

New Mailing Address:

FEI Number: 20-2900986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEINBERG, STEVEN A
7805 SW 6TH COURT
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

STEVEN, FINNERY MGR
3983 SPYGLASS HILL RD
SARASOTA, FL 34238 US

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: SARAH ROACH

01/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FINNERY, STEVEN
Address: 3983 SPYGLASS HILL ROAD
City-St-Zip: SARASOTA, FL 34238 US

Title: MGRM () Delete
Name: FINNERY, JEAN
Address: 3983 SPYGLASS HILL ROAD
City-St-Zip: SARASOTA, FL 34238 US

Title: MGRM () Delete
Name: ROACH, SARAH
Address: 9134 PALM ISLAND CIR.
City-St-Zip: FT. MYERS, FL 33903

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: SARAH ROACH

MGR

01/14/2008

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