2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055527

Entity Name: MARY WOOLEY LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3319 SEMINOLE AVENUE 3319 SEMINOLE AVENUE FORT MYERS, FL 33916 US

Current Mailing Address: New Mailing Address:

3319 SEMINOLE AVENUE 3319 SEMINOLE AVENUE FORT MYERS, FL 33916 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

WOOLEY, MARY 3319 SEMINOLE AVENUE FORT MYERS, FL 33916 US

MANAGING MEMBERS/MANAGERS:

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

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 WOOLEY, MARY
 Name:
 WOOLEY, MARY

 Address:
 3319 SEMINOLE AVENUE
 Address:
 3319 SEMINOLE AVENUE

 City-St-Zip:
 FORT MYERS, FL 33916
 City-St-Zip:
 FORT MYERS, FL 33916 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:WOOLEY, JAMESName:WOOLEY, JAMESAddress:3319 SEMINOLE AVENUEAddress:3319 SEMINOLE AVENUECity-St-Zip:FORT MYERS, FL 33916City-St-Zip:FORT MYERS, FL 33916 US

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: MARY WOOLEY MGRM 03/20/2009