

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067724

Entity Name: 4010 5TH ST E, LLC

FILED  
May 02, 2007  
Secretary of State

## Current Principal Place of Business:

9080 58TH DRIVE EAST  
200  
BRADENTON, FL 34202

## New Principal Place of Business:

4909 MANATEE AVE. W.  
BRADENTON, FL 34209

## Current Mailing Address:

9080 58TH DRIVE EAST  
200  
BRADENTON, FL 34202

## New Mailing Address:

4909 MANATEE AVE. W.  
BRADENTON, FL 34209

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

WICKMAN & WYCKOFF, P.A.  
4909 MANATEE AVENUE WEST  
BRADENTON, FL 34209 US

## Name and Address of New Registered Agent:

WYCKOFF LAW FIRM, P.A.  
4909 MANATEE AVENUE WEST  
BRADENTON, FL 34209 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: MICHAEL D. WYCKOFF

05/02/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: WYCKOFF, MICHAEL D  
Address: 9080 58TH DR. E., STE. 200  
City-St-Zip: BRADENTON, FL 34228

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WYCKOFF, MICHAEL D  
Address: 4909 MANATEE AVE. W.  
City-St-Zip: BRADENTON, FL 34209

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: MICHAEL D. WYCKOFF

PDT

05/02/2007

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