## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000071682

Entity Name: LOTS OF RETURNS, L.L.C.

FILED Apr 29, 2008 Secretary of State

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

17801 MURDOCK CIRCLE, SUITE C 17801 MURDOCK CIRCLE PORT CHARLOTTE, FL 33948

SUITE C

PORT CHARLOTTE, FL 33948

**Current Mailing Address: New Mailing Address:** 

17801 MURDOCK CIRCLE, SUITE C 17801 MURDOCK CIRCLE

PORT CHARLOTTE, FL 33948 SUITE C

PORT CHARLOTTE, FL 33948

FEI Number: 20-3182187 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WUNDER, JAY WUNDER, JAY

17801 MURDOCK CIRCLE, SUITE C 17801 MURDOCK CIRCLE

PORT CHARLOTTE, FL 33948 SUITE C

PORT CHARLOTTE, FL 33948 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: 04/29/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

WUNDER JAY Name: Name: 17801 MURDOCK CIRCLE, SUITE C Address: Address: PORT CHARLOTTE, FL 33948 City-St-Zip: City-St-Zip:

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

SPADAFORA, JOSEPH Name: Name: Address: 317 SEVERIN ROAD Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip:

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

BATZER, JON Name: Name: 5030 SOUTHERN PINE CIRCLE Address: Address: City-St-Zip: VENICE, FL 34293 City-St-Zip:

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

Name: HINTZ, MARCO Name: HINTZ, MARCO 3627 PARKRIDGE CIRCLE Address: 1264 WHITE OAK TRAIL Address: City-St-Zip: PORT CHARLOTTE, FL 33948 City-St-Zip: SARASOTA, FL 34243

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

WILLIAMS, BRYCE WILLIAMS, BRYCE Name: Name: 337 WILSHIRE DRIVE 1041 CREEK NINE DRIVE Address: Address: City-St-Zip: NUTLEY, NJ 07110 City-St-Zip: NORTH PORT, FL 34291

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: JAY WUNDER **MGRM** 04/29/2008