2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079169

Entity Name: WAX MYRTLE, L.L.C.

FILED Feb 17, 2009 Secretary of State

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

3860 WAX MYRTLE RUN NAPLES, FL 34112

Current Mailing Address: New Mailing Address:

P.O. BOX 902 3860 WAX MYRTLE RUN MARCO ISLAND, FL 34146 US NAPLES, FL 34112

FEI Number: 65-1257009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOODWARD, CRAIG R
606 BALD EAGLE DRIVE, SUITE 500
MARCO ISLAND, FL 34145 US
LAWRENCE, BARBARA A MGR
3860 WAX MYRTLE RUN
NAPLES, FL 34112 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: BARBARA A. LAWRENCE 02/17/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition
Name: LAWRENCE, BARBARA A
Address: P.O. BOX 902 Address: 3860 WAX MYRTLE RUN
City-St-Zip: MARCO ISLAND, FL 34146 City-St-Zip: NAPLES, FL 34112

City-St-Zip: MARCO ISLAND, FL 34146 City-St-Zip: NAPLES, FL 34112

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

 Name:
 LAWRENCE, P. BROOKE
 Name:
 LAWRENCE, P. BROOKE

 Address:
 P.O. BOX 902
 Address:
 3860 WAX MYRTLE RUN

 City-St-Zip:
 MARCO ISLAND, FL 34146
 City-St-Zip:
 NAPLES, FL 34112

Title: MGR () Delete Title: () Change () Addition

 Name:
 THOMPSON, RONALD L
 Name:

 Address:
 3816 WAX MYRTLE RUN
 Address:

 City-St-Zip:
 NAPLES, FL 34112
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 THOMPSON, BERNADINE F
 Name:

 Address:
 3816 WAX MYRTLE RUN
 Address:

 City-St-Zip:
 NAPLES, FL 34112
 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: BARBARA A. LAWRENCE MGR 02/17/2009