2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2009
Secretary of State

DOCUMENT# L05000093322

Entity Name: LATANIC LLC

Current Principal Place of Business:

3914 WEST RIVERSIDE DRIVE
FT. MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

3914 WEST RIVERSIDE DRIVE
FT. MYERS, FL 33901

New Mailing Address:

FEI Number: 54-2183781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERMAN-ENNEN, ELIZABETH
3914 WEST RIVERSIDE DR
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	HERMAN-ENNEN, ELIZABETH	
Address:	3914 WEST RIVERSIDE DRIVE	
City-St-Zip:	FT. MYERS, FL 33901	
Title:	VOO	( ) Delete
Name:	FLORIDA LIFESTYLE HO, MES OF FORT MY E RS	
Address:	14311 METROPOLIS AVE, SUITE 101	
City-St-Zip:	FT. MYERS, FL 33912	
Title:	S	( ) Delete
Name:	HERMAN-ENNEN, ELIZABETH	
Address:	3914 WEST RIVERSIDE DRIVE	
City-St-Zip:	FT. MYERS, FL 33901	
Title:	T	( ) Delete
Name:	FLORIDA LIFESTYLE HO, MES OF FORT MY E RS	
Address:	14311 METROPOLIS AVE, SUITE 101	
City-St-Zip:	FT. MYERS, FL 33912	

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:	
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: ELIZABETH HERMAN-ENNEN MGR 01/07/2009

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