

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000117376

Entity Name: WELK ENTERPRISES, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

26 PINECREST PLAZA  
136  
SOUTHERN PINES, NC 28387 US

**Current Mailing Address:**

26 PINECREST PLAZA  
136  
SOUTHERN PINES, NC 28387 US

FEI Number: 02-0761909

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWOPE, SCOTT P J.D.  
2450 SUNSET POINT ROAD  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

26 PINECREST PLAZA  
126  
SOUTHERN PINES, NC 28387 US

**New Mailing Address:**

26 PINECREST PLAZA  
126  
SOUTHERN PINES, NC 28387 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: MGRM  
Name: MELTON, MICHAEL  
Address: 26 PINECREST PLAZA #126  
City-St-Zip: SOUTHERN PINES, NC 28387 US

Title: MGRM  
Name: ROUSE, ROBERT  
Address: 26 PINECREST PLAZA #126  
City-St-Zip: SOUTHERN PINES, NC 28387 US

I hereby 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 MELTON

MGRM

04/30/2010

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