

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000083573

**FILED**  
**Apr 14, 2008**  
**Secretary of State**

**Entity Name:** ALL GONE, LLC

**Current Principal Place of Business:**

325 LAUREL ROAD EAST  
NOKOMIS, FL 34275 US

**New Principal Place of Business:**

**Current Mailing Address:**

325 LAUREL ROAD EAST  
NOKOMIS, FL 34275 US

**New Mailing Address:**

**FEI Number:** 20-5587778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATROUS, ROBERT P ESQ.  
2033 WOOD STREET  
SUITE 220  
SARASOTA, FL 34237 US

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

LEDBETTER, STEVEN W ESQ.  
4140 WOODMERE PARK BLVD.  
SUITE 4  
VENICE, FL 34293 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: STEVEN W LEDBETTER

04/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BATTAGLIA, GARRY  
Address: 325 LAUREL ROAD EAST  
City-St-Zip: NOKOMIS, FL 34275 US

**ADDITIONS/CHANGES:**

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: GARRY BATTAGLIA

MGRM

04/14/2008

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