

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095984

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: WOOD WORKS INVESTMENT "LLC"

**Current Principal Place of Business:**

506 WOODVIEW WAY  
BRADENTON, FL 34212

**New Principal Place of Business:**

**Current Mailing Address:**

506 WOODVIEW WAY  
BRADENTON, FL 34212

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

SLOWIK, JOSEPH D  
506 WOODVIEW WAY  
BRADENTON, FL 34212 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 ( ) Delete  
Name: SLOWIK, JOSEPH P  
Address: 20690 CAPELLO DR.  
City-St-Zip: VENICE, FL 34292

Title: MGRM ( ) Delete  
Name: SLOWIK, JOSEPH D  
Address: 506 WOODVIEW WAY  
City-St-Zip: BRADENTON, FL 34212

Title: MGRM ( ) Delete  
Name: SLOWIK, GARY P  
Address: 401 WORTHINGTON DR.  
City-St-Zip: PITTSBURGH, PA 16046

Title: MGRM ( ) Delete  
Name: SLOWIK, BRIAN T  
Address: 50 ALBEMARLE AVE.  
City-St-Zip: TAMPA, FL 33606

Title: MGRM ( ) Delete  
Name: SLOWIK, MATTHEW J  
Address: 3916 NORTH FOURTH ST. TOWNHOUSE #1  
City-St-Zip: ARLINGTON, VA 22203

Title: MGRM ( ) Delete  
Name: SCAHILL, MICHAEL  
Address: 4801 BROWNSVILLE RD.  
City-St-Zip: PITTSBURGH, PA 15236

**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:

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: JOSEPH D SLOWIK

MGRM

04/30/2009

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