

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000431

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: MALLETT LLC

**Current Principal Place of Business:**

3569 WEBBER STREET  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

3569 WEBBER STREET  
SARASOTA, FL 34239

**New Mailing Address:**

FEI Number: 20-8136400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MALLETT, ROBERT E JR  
3569 WEBBER STREET  
SARASOTA, FL 34239 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: MALLETT, ROBERT E JR  
Address: 2518 WELLS AVENUE  
City-St-Zip: SARASOTA, FL 34232 US

Title: MGRM ( ) Delete  
Name: MALLETT, GEOFFREY P  
Address: 6208 WATTERSON TRAIL  
City-St-Zip: LOUISVILLE, KY 40291 US

Title: MGRM ( ) Delete  
Name: LIEDKTE, SABRA  
Address: 2180 WEST DOLPHIN DRIVE  
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: MGRM ( ) Delete  
Name: ENTENBERG, VIRGINIA E  
Address: 5420 NORTH 35TH STREET  
City-St-Zip: HOLLYWOOD, FL 33021 US

**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: ROBERT E MALLETT

MM

01/15/2009

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