

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000003574

Entity Name: LA PASTA DI NONNA LLC

FILED  
Aug 21, 2009  
Secretary of State

## Current Principal Place of Business:

8918 LANTANA ROAD  
LAKE WORTH, FL 33464

## New Principal Place of Business:

8918 W. LANTANA ROAD S-C  
LAKE WORTH, FL 33464

## Current Mailing Address:

1592 LAKE BREEZE DRIVE  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 22-3950992      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

JAKOB, SILVANA G  
1592 LAKE BREEZE DR  
WELLINGTON, FL 33414 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: SILVANA JAKOB

08/21/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: JAKOB, SILVANA  
Address: 1592 LAKE BREEZE DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR ( ) Delete  
Name: WILLETT, MICHAEL J  
Address: 1592 LAKE BREEZE DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR ( ) Delete  
Name: WILLETT, KYLE  
Address: 1592 LAKE BREEZE DRIVE  
City-St-Zip: WELLINGTON, FL 33414

## 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:

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: SILVANA JAKOB

MGR

08/21/2009

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