## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009431

Entity Name: ENSITE, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4450 CAMINO REAL WAY 22053 WEST FIRST STREET FORT MYERS, FL 33966 FORT MYERS, FL 33902

Current Mailing Address: New Mailing Address:

C/O JOHN WICKER PA
PO DRAWER 60206
FORT MYERS, FL 33906
C/O JOHN M. WICKER, P.A.
P.O. DRAWER 60205
FORT MYERS, FL 33906

FEI Number: 26-0547523 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WICKER, JOHN M PA

12670 NEW BRITTANY BLVD

SUITE 101

FORT MYERS, FL 33907 US

WICKER, JOHN M

12670 NEW BRITTANY BLVD

SUITE 101

FORT MYERS, FL 33907 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: JOHN M. WICKER 04/29/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

 Title:
 MGRM () Delete
 Title:
 MGRM (X) Change () Addition

 Name:
 SPOSATO, STEPHEN
 Name:
 SPOSATO, STEPHEN

 Address:
 4450 CAMINO REAL WAY
 Address:
 2053 WEST FIRST STREET

City-St-Zip: FORT MYERS, FL 33966 City-St-Zip: FORT MYERS, FL 33902

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SMITH, BRIAN R Name: SMITH, BRIAN R Address: 4450 CAMINO REAL WAY Address: 2053 WEST FIRST STREET

 Address:
 4450 CAMINO REAL WAY
 Address:
 2053 WEST FIRST STREET

 City-St-Zip:
 FORT MYERS, FL 33966
 City-St-Zip:
 FORT MYERS, FL 33902

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: BRIAN R. SMITH MGRM 04/29/2009