

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047466

Entity Name: MOONLOFT, LLC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

713 WEST RETTA ESPLANADE
PUNT GORDA, FL 33950

New Principal Place of Business:

713 WEST RETTA ESPLANADE
PUNTA GORDA, FL 33950

Current Mailing Address:

P.O. BOX 510993
PUNTA GORDA, FL 339510093

New Mailing Address:

P.O. BOX 510993
PUNTA GORDA, FL 33951 US

FEI Number: 26-0149858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULZ, MARTIN
713 WEST RETTA ESPLANADE
PUNT GORDA, FL 33950 US

Name and Address of New Registered Agent:

SCHULZ, MARTIN
713 WEST RETTA ESPLANADE
PUNTA GORDA, FL 33950 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:

04/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HARTL, FRANZ
Address: 820 VIA ESPLANADE
City-St-Zip: PUNTA GORDA, FL 339510

Title: MGR () Delete
Name: SCHULTZ, MARTIN
Address: 713 W RETTA ESPLANADE
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARTL, FRANZ
Address: 820 VIA ESPLANADE
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: MGR (X) Change () Addition
Name: SCHULZ, MARTIN
Address: 713 W RETTA ESPLANADE
City-St-Zip: PUNTA GORDA, FL 33950 US

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: MARTIN SCHULZ

MGR

04/21/2009

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