

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053029

Entity Name: ADLER SOLUTIONS, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

7115 SANDHILLS PLACE
BRADENTON, FL 34202

New Principal Place of Business:

7115 SANDHILLS PLACE
LAKEWOOD RANCH, FL 34202 US

Current Mailing Address:

7115 SANDHILLS PLACE
BRADENTON, FL 34202

New Mailing Address:

7115 SANDHILLS PLACE
LAKEWOOD RANCH, FL 34202 US

FEI Number: 26-0258102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADLER, JEAN
7115 SANDHILLS PLACE
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

ADLER, JEAN
7115 SANDHILLS PLACE
LAKEWOOD RANCH, FL 34202 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:

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADLER, JEAN
Address: 7115 SANDHILLS PLACE
City-St-Zip: BRADENTON, FL 34202

Title: MGRM () Delete
Name: ADLER, MARK
Address: 7115 SANDHILLS PLACE
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ADLER, JEAN
Address: 7115 SANDHILLS PLACE
City-St-Zip: LAKEWOOD RANCH, FL 34202 US

Title: MGRM (X) Change () Addition
Name: ADLER, MARK
Address: 7115 SANDHILLS PLACE
City-St-Zip: LAKEWOOD RANCH, FL 34202 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: JEAN J. ADLER

MGRM

04/29/2009

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