

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074394

FILED
Feb 02, 2009
Secretary of State

Entity Name: ROMA WOODWORKING, LLC.

Current Principal Place of Business:

7010 28TH ST CRT E
SARASOTA, FL 34243

New Principal Place of Business:

7010 28TH ST COURT EAST
SARASOTA, FL 34243

Current Mailing Address:

7010 28TH ST CRT E
SARASOTA, FL 34243

New Mailing Address:

7010 28TH ST COURT EAST
SARASOTA, FL 34243

FEI Number: 26-0598830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUSMANN, KARL W
3105 WILDERNESS BLVD W
PARRISH, FL 34219 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: SUSMANN, KARL W
Address: 3105 WILDERNESS BLVD W
City-St-Zip: PARRISH, FL 34219

Title: MGRM () Delete
Name: SOMMA, ENRICO
Address: 6283 BUCKINGHAM ST
City-St-Zip: SARASOTA, FL 34238

Title: MGR () Delete
Name: SUSMANN, LORI R
Address: 3105 WILDERNESS BLVD W
City-St-Zip: PARRISH, FL 34219

Title: MGR () Delete
Name: SOMMA, SILVANA
Address: 6283 BUCKINGHAM ST
City-St-Zip: SARASOTA, FL 34238

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: SILVANA SOMMA

MRS

02/02/2009

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