2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# L07000083856

Entity Name: ROBERT MCLOUGHLIN, LLC

Current Principal Place of Business:

5046 INDIAN MOUND ST
SARASOTA, FL 34232

New Principal Place of Business:

4331 ARROW CIRCLE
SARASOTA, FL 34232

Current Mailing Address:

5046 INDIAN MOUND ST
SARASOTA, FL 34232

New Mailing Address:

PO BOX 51394
SARASOTA, FL 34232

FEI Number: 26-0751804 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCLOUGHLIN, ROBERT W
5046 INDIAN MOUND ST
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

MCLOUGHLIN, ROBERT W
4331 ARROW CIRCLE
SARASOTA, FL 34232 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: _____ 04/23/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: MCLOUGHLIN, ROBERT W
Address: 5046 INDIAN MOUND ST
City-St-Zip: SARASOTA, FL 34232

Title: MGRM ( ) Delete
Name: MCLOUGHLIN, BRITTANY
Address: 5046 INDIAN MOUND ST
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MCLOUGHLIN, ROBERT W
Address: 4331 ARROW CIRCLE
City-St-Zip: SARASOTA, FL 34232

Title: MGRM (X) Change ( ) Addition
Name: MCLOUGHLIN, BRITTANY
Address: 4331 ARROW CIRCLE
City-St-Zip: SARASOTA, FL 34232

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: BRITTANY MCLOUGHLIN MGRM 04/23/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date