

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000086811

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** WOLFE MANAGEMENT ASSOCIATES, LLC

**Current Principal Place of Business:**

474313 E. STATE RD. 200  
FERNANDINA BEACH, FL 32034 US

**New Principal Place of Business:**

**Current Mailing Address:**

622 SEVENTH ST.  
OAKMONT, PA 15139 US

**New Mailing Address:**

**FEI Number:** 26-0777318

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WOLFE, MICHAEL S  
85594 KIRKLAND RD.  
YULEE, FL 32097 US

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

MILLER, JOHN MCE.  
1328 THIRD STREET NORTH  
JACKSONVILLE BEACH, FL 32250 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 MCE. MILLER, P.A.

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WOLFE, J. M.  
Address: 622 SEVENTH ST  
City-St-Zip: OAKMONT, PA 15139 US

Title: MGRM  
Name: WOLFE, JANICE W  
Address: 622 SEVENTH ST.  
City-St-Zip: OAKMONT, PA 15139 US

Title: MGRM  
Name: WOLFE, JEFFERY A  
Address: 1492 N. EASTWIND DR.  
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

I hereby 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: J. M. WOLFE

CEO

04/30/2010

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