2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105245

Entity Name: WOLCOTT COMMUNITY NEWS, LLC.

FILED May 21, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3153 SHADY DELL LANE UNIT 220

MELBOURNE, FL 32935 US

Current Mailing Address: New Mailing Address:

18 HILLTOP DRIVE

WOLCOTT, CT 06716 US

FEI Number: 20-5883408 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MOORE, JULIE MOORE, JULIE

3135 SHADY DELL LANE 3135 SHADY DELL LANE

MELBOURNE, FL 32935 US UNIT 220 MELBOURNE, FL 32935 US

MIELDOURINE, FL 32933 U

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: JULIE F. MOORE 05/21/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOORE, JULIE
 Name:

 Address:
 3935 SHADY DELL LANE UNIT 220
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOORE, ROBERT
 Name:

 Address:
 3935 SHADY DELL LANE UNIT 220
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935 US
 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: JULIE F. MOORE MGRM 05/21/2009