2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# L08000020624

Entity Name: WAREING ENTERPRISES LLC

Current Principal Place of Business:

510 WEST STREET
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

510 WEST STREET
NAPLES, FL 34108

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

IKARD, ROBERT W
510 WEST STREET
NAPLES, FL 34108 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: IKARD, ROBERT W
Address: 825 WEBER BLVD SOUTH
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: IKARD, ROBERT W
Address: 510 WEST STREET
City-St-Zip: NAPLES, FL 34108

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: ROBERT W. IKARD MM 03/02/2009

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