## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000032693

2324 SW 22ND STREET

City-St-Zip: CAPE CORAL, FL 33991

Address:

Entity Name: EMERALD WEALTH MANAGEMENT SOLUTIONS, LLC

FILED Aug 10, 2009 Secretary of State

| Current P                                   | rincipal Place of Business:   | New Principal Pl                            | New Principal Place of Business:              |  |
|---|---|---|---|--|
| 3011 DEL PRADO BLVD<br>CAPE CORAL, FL 33904 |   |   | 3011 DEL PRADO BLVD S<br>CAPE CORAL, FL 33904 |  |
| Current Mailing Address:                    |   | New Mailing Add                             | New Mailing Address:                          |  |
|   | 22ND STREET<br>RAL, FL 33991  |   |   |  |
| In accordan                                 | FEI Number Applied For ( ) nce with s. 607.193(2)(b), F.S., the limited liability | company did not receive the prior n         | otice.  |  |
| Name and                                    | d Address of Current Registered Agent   | : Name and Addre                            | ss of New Registered Agent:                   |  |
|   | DEANNE<br>22ND STREET<br>RAL, FL 33991 US   |   |   |  |
|   | e named entity submits this statement for t<br>e of Florida.                      | he purpose of changing its regis            | tered office or registered agent, or both     |  |
| SIGNATU                                     | RE:   |   |   |  |
|   | Electronic Signature of Registered  | Agent                                       | Date  |  |
| MANAGING MEMBERS/MANAGERS:                  |   | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES:                            |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM () Delete<br>MATHIS, DEANNE<br>2324 SW 22ND STREET<br>CAPE CORAL, FL 33991   | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                         |  |
| Title:<br>Name:                             | MGR ( ) Delete<br>MATHIS, TERRY O   | Title:<br>Name:                             | ( ) Change ( ) Addition                       |  |

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: DEANNE MATHIS MGRM 08/10/2009