

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045096

Entity Name: SALTWATER BAIT SHOP, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1950-UNIT 11 SAN CARLOS BLVD.
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

1950-UNIT 11 SAN CARLOS BLVD.
FORT MYERS BEACH, FL 33931

New Mailing Address:

2828 SW 35TH STREET
CAPE CORAL, FL 33914

FEI Number: 34-3809462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COLE, BURNETTE
1950-UNIT 11 SAN CARLOS BLVD.
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

HESS, BARBARA A
2828 SW 35TH STREET
CAPE CORAL, FL 33914 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: BARBARA A. HESS

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLE, BURNETTE
Address: 1950-UNIT 11 SAN CARLOS BLVD.
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HESS, STEVEN E
Address: 2828 SW 35TH STREET
City-St-Zip: CAPE CORAL, FL 33914

Title: MGRM () Change (X) Addition
Name: HESS, BARBARA A
Address: 2828 SW 35TH STREET
City-St-Zip: CAPE CORAL, FL 33914

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: BARBARA A. HESS

MGRM

04/30/2009

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