

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049904

Entity Name: ALL PRO WILDLIFE, LLC

FILED  
May 21, 2009  
Secretary of State

**Current Principal Place of Business:**

8638 KEY BISCAYBE DR, APT 102  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

8638 KEY BISCAYBE DR, APT 102  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 26-2644741      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:**

SPANOLA, MIKE  
1945 HEWETT LANE  
MAITLAND, FL 32751 US

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

SPANOLA, MIKE A  
8638 KEY BISCAYNE DR APT 102  
TAMPA, FL 33614 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: MIKE SPANOLA

05/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SPANOLA, MIKE  
Address: 1945 HEWETT LANE  
City-St-Zip: MAITLAND, FL 32751 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SPANOLA, MIKE  
Address: 8638 KEY BISCAYNE DR APT 102  
City-St-Zip: TAMPA, FL 33614 US

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: MIKE SPANOLA

MGRM

05/21/2009

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