

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050786

FILED
Apr 20, 2009
Secretary of State

Entity Name: COBRA HEADS, JIGS, RIGS, & FISHING THINGS, LLC

Current Principal Place of Business:

83268 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Principal Place of Business:

134 MILANO DRIVE
ISLAMORADA, FL 33036

Current Mailing Address:

POST OFFICE BOX 1135
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 26-4699808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GIARDINO, JOSEPH T
134 MILANO DRIVE
ISLAMORADA, FL 33036 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: GIARDINO, JOSEPH T
Address: 134 MILANO DRIVE
City-St-Zip: ISLAMORADA, FL 33036 US

Title: MGR () Delete
Name: GIARDINO, LORETTA E
Address: 134 MILANO DRIVE
City-St-Zip: ISLAMORADA, FL 33036 US

Title: MGR () Delete
Name: GIARDINO, JENELLE R
Address: 134 MILANO DRIVE
City-St-Zip: ISLAMORADA, FL 33036 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
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: JOSEPH T. GIARDINO

PRES

04/20/2009

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