

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081476

Entity Name: DOLLIE HOLDINGS, LLC

FILED  
Jan 26, 2009  
Secretary of State

**Current Principal Place of Business:**

721 FIRST AVENUE NORTH  
ST. PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ERNEST L. MASCARA  
PO BOX 266  
ST. PETERSBURG, FL 33731 US

**New Mailing Address:**

FEI Number: 26-3255009      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MASCARA, ERNEST L  
721 FIRST AVENUE NORTH  
ST. PETERSBURG, FL 33701 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: MASCARA, ERNEST L  
Address: PO BOX 266  
City-St-Zip: ST. PETERSBURG, FL 33731 US

Title: MGRM ( ) Delete  
Name: MASCARA, MARIE D  
Address: PO BOX 266  
City-St-Zip: ST. PETERSBURG, FL 33731 US

**ADDITIONS/CHANGES:**

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: ERNEST L. MASCARA      MGRM      01/26/2009

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