

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084924

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** WENDY CULPEPPER LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

366 5TH AVENUE, STE. 816  
NEW YORK, NY 10001

**New Principal Place of Business:**

888 UNION STREET  
C-4  
BROOKLYN, NY 11215 US

**Current Mailing Address:**

P.O. BOX 881117  
PORT ST LUCIE, FL 349881117

**New Mailing Address:**

P.O. BOX 881117  
PORT ST LUCIE, FL 349881117 US

FEI Number: 20-1926370      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:**

CULPEPPER, JUDY  
7921 PLANTATION LAKES DRIVE  
PORT ST LUCIE, FL 34986 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: CULPEPPER, WENDY  
Address: 307 EAST 44TH STREET, #505  
City-St-Zip: NEW YORK, NY 10017

Title: MGRM ( ) Delete  
Name: CULPEPPER, JUDY  
Address: 7921 PLANTATION LAKES DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34986

Title: MGRM ( ) Delete  
Name: CULPEPPER, ERNEST BRETT  
Address: 7921 PLANTATION LAKES DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34986

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: CULPEPPER, WENDY  
Address: 888 UNION STREET, #C-4  
City-St-Zip: BROOKLYN, NY 11215

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: JUDY CULPEPPER

MGRM

05/01/2009

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