

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000098858

FILED
Feb 25, 2009
Secretary of State

Entity Name: KOOL RIDERZ RIDEABLE SADDLE COVERS, LLC

Current Principal Place of Business:

13211 FRUITVILLE RD.
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

13211 FRUITVILLE RD.
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 36-4642582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHWARTZ, MICHAEL D
13211 FRUITVILLE RD.
SARASOTA, FL 34240 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: ROBERTSON, KENNETH W
Address: 1100 BAYSHORE DR
City-St-Zip: TERRA CEIA, FL 34250

Title: MGRM () Delete
Name: ROBERTSON, JOY P
Address: 1100 BAYSHORE DR
City-St-Zip: TERRA CEIA, FL 34250

Title: MGRM () Delete
Name: SCHWARTZ, MICHAEL D
Address: 13211 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34240

Title: MGRM () Delete
Name: SCHWARTZ, JO ANNE
Address: 13211 FRUITVILLE RD
City-St-Zip: SARASOTA, FL 34240

Title: MGRM (X) Delete
Name: NEWSOME, CHRISTY M
Address: 4150 VERNA BETHANY RD
City-St-Zip: MYAKKA CITY, FL 34251

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:

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: MICHAEL D. SCHWARTZ

MGRM

02/25/2009

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