

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000016195

Entity Name: ALLWOOL VNC, LLC

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

13950 NW 8TH STREET  
SUNRISE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

13950 NW 8TH STREET  
SUNRISE, FL 33325 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

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

WOOL, BARBARA  
13950 NW 8TH STREET  
SUNRISE, FL 33325 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WOOL, BARBARA  
Address: 13950 NW 8TH STREET  
City-St-Zip: SUNRISE, FL 33325 US

I hereby 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: BARBARA WOOL

MGR

04/09/2010

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