

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000065296

Entity Name: WASSMANN, LLC

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3665 BONITA BEACH ROAD, SUITE 3  
BONITA SPRINGS, FL 34143

**New Principal Place of Business:**

3665 BONITA BEACH ROAD, SUITE 1-3  
BONITA SPRINGS, FL 34143

**Current Mailing Address:**

3665 BONITA BEACH ROAD, SUITE 3  
BONITA SPRINGS, FL 34143

**New Mailing Address:**

3665 BONITA BEACH ROAD, SUITE 1-3  
BONITA SPRINGS, FL 34143

FEI Number: 35-2369860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALLURE ACCOUNTING, LLC  
3665 BONITA BEACH ROAD, SUITE 3  
BONITA SPRINGS, FL 34143 US

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

ALLURE ACCOUNTING, LLC  
3665 BONITA BEACH ROAD, SUITE 1-3  
BONITA SPRINGS, FL 34143 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

04/29/2010

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WASSMANN, RALF G  
Address: 3665 BONITA BEACH ROAD, SUITE 1-3  
City-St-Zip: BONITA SPRINGS, FL 34143

Title: MGRM  
Name: WASSMANN, LUCIE  
Address: 3665 BONITA BEACH ROAD, SUITE 1-3  
City-St-Zip: BONITA SPRINGS, FL 34143

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: RALF G WASSMANN

MGRM

04/29/2010

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