

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000009330

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA WHOLESALE MATERIALS LLC

**Current Principal Place of Business:**

5009 COLLINGSWOOD BLVD.  
PORT CHARLOTTE, FL 33948 US

**New Principal Place of Business:**

1009 LASSETER STREET  
NORTH PORT, FL 34288 US

**Current Mailing Address:**

5009 COLLINGSWOOD BLVD.  
PORT CHARLOTTE, FL 33948 US

**New Mailing Address:**

1009 LASSETER STREET  
NORTH PORT, FL 34288 US

**FEI Number:** 27-1827860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, SCOTT D  
5009 COLLINGSWOOD BLVD.  
PORT CHARLOTTE, FL 33948 US

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

BROWN, SCOTT D  
1009 LASSETER STREET  
NORTH PORT, FL 34288 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: SCOTT BROWN

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BROWN, SCOTT D  
Address: 1009 LASSETER STREET  
City-St-Zip: NORTH PORT, FL 34288 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: SCOTT BROWN

MGRM

04/19/2011

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