

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000008344

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** WOLFE & ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

6210 SCOTT STREET  
# 115  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

5615 BLACKJACK CT. S.  
PUNTA GORDA, FL 33982

**Current Mailing Address:**

3941 TAMIAMI TRL.  
# 3157-212  
PUNTA GORDA, FL 33950

**New Mailing Address:**

**FEI Number:** 65-0966213

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 32301 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  
Name: WOLFE, RONALD E  
Address: 3941 TAMIAMI TRL. # 3157-212  
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM  
Name: WOLFE, ROGER E  
Address: 3941 TAMIAMI TRL. # 3157-212  
City-St-Zip: PUNTA GORDA, FL 33950

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: ROGER E. WOLFE

MGRM

05/01/2011

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