

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009052

Entity Name: NEEDLENOSE NO. 2, L.C.

FILED  
Mar 03, 2009  
Secretary of State

## Current Principal Place of Business:

19970 WILKINSON LEAS ROAD  
TEQUESTA, FL 33469

## New Principal Place of Business:

898 NE 88TH STREET  
MIAMI, FL 33138

## Current Mailing Address:

19970 WILKINSON LEAS ROAD  
TEQUESTA, FL 33469

## New Mailing Address:

FEI Number: 65-1089250

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KELLER, LISA  
19970 WILKINSON LEAS RD  
JUPITER, FL 33469 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: MGR ( ) Delete  
Name: ELLIOTT, ERNEST F  
Address: 102 TOLLGATE LANE  
City-St-Zip: ISLAMORADA, FL 33036

Title: MGR ( ) Delete  
Name: ELLIOTT, SANDRA  
Address: 102 TOLLGATE LANE  
City-St-Zip: ISLAMORADA, FL 33036

Title: MGRM ( ) Delete  
Name: KELLER, LISA  
Address: 19970 WILKINSON LEAS ROAD  
City-St-Zip: TEQUESTA, FL 33469

Title: MGR ( ) Delete  
Name: MCCOURT, TAMMY  
Address: 178 JOHNSON HILL RD  
City-St-Zip: WINGDALE, NY 12594

## 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:

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: LISA KELLER

MGRM

03/03/2009

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