

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000219

**FILED**  
**Feb 28, 2008**  
**Secretary of State**

**Entity Name:** WARREN DISTRIBUTORS, LLC

**Current Principal Place of Business:**

9040 TOWN CENTER PKWY  
104  
BRADENTON, FL 34202

**New Principal Place of Business:**

330 S. PINEAPPLE AVE  
203  
SARASOTA, FL 34236

**Current Mailing Address:**

9040 TOWN CENTER PKWY  
104  
BRADENTON, FL 34202

**New Mailing Address:**

330 S. PINEAPPLE AVE  
203  
SARASOTA, FL 34236

**FEI Number:** 52-2211609

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARREN, ROBERT  
9040 TOWN CENTER PKWY  
STE 104  
BRADENTON, FL 34202 US

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

WARREN, ROBERT  
330 S. PINEAPPLE AVE.  
203  
SARASOTA, FL 34236 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:** ROBERT M WARREN

02/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** CEO ( ) Delete  
**Name:** WARREN, ROBERT  
**Address:** 9040 TOWN CENTER PKWY STE 104  
**City-St-Zip:** BRADENTON, FL 34202

**ADDITIONS/CHANGES:**

**Title:** CEO (X) Change ( ) Addition  
**Name:** WARREN, ROBERT  
**Address:** 330 S. PINEAPPLE AVE, STE. 203  
**City-St-Zip:** SARASOTA, FL 34236

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:** ROBERT M WARREN

CEO

02/28/2008

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