

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000217

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: WOLFSTONE MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

3655 MIDDLEBURG DR  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

3655 MIDDLEBURG DR  
WELLINGTON, FL 33414

**New Mailing Address:**

FEI Number: 52-2358220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RILEY, SCHUYLER  
12564 MALLET CIRCLE  
WELLINGTON, FL 33414 US

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

RILEY, SCHUYLER C MS.  
3655 MIDDLEBURG DRIVE  
WELLINGTON, FL 33414 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: SCHUYLER RILEY

01/09/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: RILEY, SCHUYLER  
Address: 3655 MIDDLEBURG DR  
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES:**

Title: MS. (X) Change ( ) Addition  
Name: RILEY, SCHUYLER  
Address: 3655 MIDDLEBURG DR  
City-St-Zip: WELLINGTON, FL 33414

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: SCHUYLER RILEY

MS.

01/09/2008

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