

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001326

Entity Name: ELLTON MANAGEMENT, LLC

FILED
May 07, 2009
Secretary of State

Current Principal Place of Business:

327 N. AIRPORT RD
NAPLES, FL 34101

New Principal Place of Business:

Current Mailing Address:

11488 NORTH LEE HUGHES ROAD
HAMMOND, LA 704014806

New Mailing Address:

FEI Number: 04-3619268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RADFORD, MELISSA
327 N AIRPORT RD
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

MILLER, WARREN
327 N AIRPORT RD
NAPLES, FL 34104 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: WARREN MILLER

05/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DODGE, ANTHONY W
Address: 11488 NORTH LEE HUGHES ROAD
City-St-Zip: HAMMOND, LA 704014806

Title: MGRM () Delete
Name: STRECKFUS, ELOISE S
Address: 11488 NORTH LEE HUGHES ROAD
City-St-Zip: HAMMOND, LA 704014806

ADDITIONS/CHANGES:

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: ANTHONY DODGE

MGRM

05/07/2009

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