

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000903

FILED  
Apr 08, 2008  
Secretary of State

Entity Name: VON MORGEN, L.C.

**Current Principal Place of Business:**

BAUR & KLEIN, P.A.  
100 NORTH BISCAYNE BLVD., SUITE 2100  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

BAUR & KLEIN, P.A.  
100 NORTH BISCAYNE BLVD., SUITE 2100  
MIAMI, FL 33132

**New Mailing Address:**

FEI Number: 65-0847152      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BAUR, THOMAS ESQ  
100 N. BISCAYNE BLVD. #2100  
MIAMI, FL 33132 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 ( ) Delete  
Name: ELFERING, GERT  
Address: 1839 W 24TH STREET  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM ( ) Delete  
Name: EGNER, FRITZ  
Address: 2000 WILLIAMS ISLAND BLVD. #2807  
City-St-Zip: AVENTURA, FL 33160

**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: GERT ELFERING

MGRM

04/08/2008

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