2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000004237

1. Entity Name
VIA CHEESE, LLC

Principal Place of Business	Mailing Address
6274 LINTON BLVD., STE. 102 DELRAY BEACH, FL 33484	6274 LINTON BLVD., STE. 102 DELRAY BEACH, FL 33484

DO NOT WRITE IN THIS SPACE

04162007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-5209294

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BRUE, NORDAHL L
8903 OAKLAND HILLS DR.
DELRAY BEACH, FL 33446

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BRUE, NORDAHL L
STREET ADDRESS	8903 OAKLAND HILLS DR.
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	MGR
NAME	DRESSELL, MICHAEL J
STREET ADDRESS	1335 PONCE DE LEON DR.
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316
TITLE	MGR
NAME	BRUE, ERIK K
STREET ADDRESS	261 SOUTH UNION ST.
CITY-ST-ZIP	BURLINGTON, VT 05401
TITLE	MGR
NAME	GUTKNECHT, JONATHAN R
STREET ADDRESS	8919 VALHALLA DR.
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/07/07-80013-010 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ 4/20/07 (561) 881-8382
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #