

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024618

FILED
Apr 28, 2008
Secretary of State

Entity Name: 405 SIXTY-SECOND PLACE, LLC

Current Principal Place of Business:

251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33145

New Principal Place of Business:

251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33149

Current Mailing Address:

251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33145

New Mailing Address:

251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33149

FEI Number: 65-0851448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EISERMANN, JUERGEN
251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33145 US

Name and Address of New Registered Agent:

EISERMANN, JUERGEN
251 KNOLLWOOD DRIVE
KEY BISCAYNE, FL 33149 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: JUERGEN EISERMANN

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: EISERMANN, JUERGEN
Address: 251 KNOLLWOOD DR
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: ROGERS, KATHY
Address: 251 KNOLLWOOD DR
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EISERMANN, JUERGEN
Address: 251 KNOLLWOOD DR
City-St-Zip: MIAMI, FL 33149

Title: MGR (X) Change () Addition
Name: ROGERS, KATHY
Address: 251 KNOLLWOOD DR
City-St-Zip: MIAMI, FL 33149

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: JUERGEN EISERMANN

MGR

04/28/2008

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