2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L00000004432

Entity Name: EINAUGLER & BELOFF, LLC

Current Principal Place of Business:

16466 BROOKFIELD ESTATE WAY
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

1 ROBERTSON DRIVE
SUITE 28
BEDMINSTER, NJ 07921

New Mailing Address:

FEI Number: 65-1007382 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONATHAN J. LICHTMAN, P.A.
20283 STATE RD.7
SUITE 300
BOCA RATON, FL 33498 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:	MGR	( ) Delete
Name:	EINAUGLER, BARRETT	
Address:	16466 BROOKFIELD ESTATE WAY	
City-St-Zip:	DELRAY BEACH, FL 33446	
Title:	MGR	( ) Delete
Name:	EINAUGLER, RICHARD	
Address:	16466 BROOKFIELD ESTATE WAY	
City-St-Zip:	DELRAY BEACH, FL 33446	
Title:	MGR	( ) Delete
Name:	BELOFF, ARTHUR	
Address:	2660 SOUTH OCEAN BLVD, UNIT 503SOUTH	
City-St-Zip:	PALM BEACH, FL 33480	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: BARRETT EINAUGLER MM 03/19/2009

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