

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000003898**

1. Entity Name  
**PELICAN BROTHERS, LLC**



Principal Place of Business  
**11370 U.S. HIGHWAY ONE  
NORTH PALM BEACH, FL 33408**

Mailing Address  
**11370 U.S. HIGHWAY ONE  
NORTH PALM BEACH, FL 33408**



04172008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**04-3612141**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

~~KUSS~~; **KAUSS, DAVID N**  
**11370 U.S. HIGHWAY ONE  
NORTH PALM BEACH, FL 33408**

**DO NOT WRITE  
IN THIS SPACE**

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:

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE: MGR  
NAME: KAUSS, DAVID N  
STREET ADDRESS: 11370 U.S. HIGHWAY ONE  
CITY-ST-ZIP: NORTH PALM BEACH, FL 33408

TITLE: MGR  
NAME: TUSCHEN, LAWRENCE F  
STREET ADDRESS: 11370 U.S. HIGHWAY ONE  
CITY-ST-ZIP: NORTH PALM BEACH, FL 33408

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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CITY-ST-ZIP:

TITLE:  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

U000000922105  
05/15/08-80033-012 138.75

**DO NOT WRITE  
IN THIS SPACE**

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:**

*David N. Kauss*

**DAVID N. KAUSS**

**4/22/08**

**561-6226800**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #