

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 26, 2007 08
Secretary of

DOCUMENT # L03000007389

1. Entity Name
COLOGNE MUNA, L.L.C.



Principal Place of Business
**6326 WHISKEY CREEK DR., STE. A
FORT MYERS, FL 33919**

Mailing Address
**6326 WHISKEY CREEK DR., STE. A
FORT MYERS, FL 33919**



06182007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2364839

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KYLE, KEVIN A
1380 ROYAL PALM SQUARE BLVD.
FORT MYERS, FL 33919**

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
NAROZNY, ROBERT
PLETSCHMUEHLENWEG 92
PULHEIM (GERMANY), NR 50259**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MUELLER, MICHAEL
LOEWENBURGSTRASSE 20
LOHMAR (GERMANY), NR 53797**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000768591
06/26/07-80001-002 50.00

**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:

Michael Mueller VICE PRESIDENT

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

06/19/07

Date

0049-2205-89783

Daytime Phone #