

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056794

Entity Name: MIKE BIERFREUND, LLC

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

1108 VAN LIEU COURT
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

1108 VAN LIEU COURT
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 21-9602373 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BIERFREUND, MIKE
1108 VAN LIEU COURT
KISSIMMEE, FL 34744 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BIERFREUND, MIKE MGR
Address: 1108 VAN LIEU CT.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGR () Delete
Name: BIERFREUND, JOE
Address: 1108 VAN LIEU CT.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: MGR () Delete
Name: BIERFREUND, MICHAEL T
Address: 1104 VAN LIEU ST.
City-St-Zip: KISSIMMEE, FL 34744 US

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: MIKE BIERFREUND

MGR

05/08/2009

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