

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021730

FILED
Mar 18, 2008
Secretary of State

Entity Name: NEIBERTS, LLC

Current Principal Place of Business:

C/O ERIK MOGELVANG
912 PREACHER CT.
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

C/O ERIK MOGELVANG
912 PREACHER CT.
NAPLES, FL 34104

New Mailing Address:

FEI Number: 20-2428856 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE REGISTERED AGENT, LLC
5147 CASTELLO DRIVE
NAPLES, FL 34103 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: MGRM () Delete
Name: MOGELVANG, ERIK
Address: 912 PREACHER CT.
City-St-Zip: NAPLES, FL 34104

Title: MGRM () Delete
Name: SCOTT, JON
Address: 4971 US HWY 98
City-St-Zip: SEBRING, FL 33876

Title: MGRM () Delete
Name: MOGELVANG, CHRISTIAN M
Address: P.O. BOX 3316
City-St-Zip: NAPLES, FL 34116

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: ERIK MOGELVANG

MGRM

03/18/2008

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