

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000021730

FILED  
Apr 14, 2009  
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:**

C/O ERIK MOGELVANG  
2100 NORTH ROAD  
NAPLES, FL 34104

**Current Mailing Address:**

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

**New Mailing Address:**

C/O ERIK MOGELVANG  
2100 NORTH ROAD  
NAPLES, FL 34104

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: MGRM (X) Change ( ) Addition  
Name: MOGELVANG, ERIK  
Address: 2100 NORTH ROAD  
City-St-Zip: NAPLES, FL 34104

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 E MOGELVANG

MGRM

04/14/2009

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