

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050971

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: ST. MORITZ DEVELOPMENT, LLC

**Current Principal Place of Business:**

5 RIVER CHASE TERRACE  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

5 RIVER CHASE TERRACE  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number: 54-2174950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCCABE, TIMOTHY P ESQ.  
C/O MCCABE & SAMILJAN, LLC  
2135 SOUTH CONGRESS AVE., SUITE 3-C  
WEST PALM BEACH, FL 33406 US

**Name and Address of New Registered Agent:**

MCCABE, TIMOTHY P ESQ.  
C/O MCCABE & SAMILJAN, LLC  
30 S. M STREET  
LAKE WORTH, FL 33460 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:

04/16/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CALDERONE, DOM  
Address: 4485 S.W. PORT WAY  
City-St-Zip: PALM CITY, FL 33990

Title: MGRM ( ) Delete  
Name: BERNARDEAU, OLIVIER  
Address: 5 RIVER CHASE TERRACE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Delete  
Name: SCHNEIDERMAN, HERBERT  
Address: 5853 VINTAGE OAKS COURT  
City-St-Zip: DELRAY BEACH, FL 33484

**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: OLIVIER BERNARDEAU

MGR

04/16/2009

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