

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093704

FILED
May 30, 2008
Secretary of State

Entity Name: VAN HOFFMAN ENTERPRISES, LLC

Current Principal Place of Business:

2771 SUN KEY PLACE
KISSIMMEE, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

56 UPPER MOUNTAIN AVE
ROCKAWAY, NJ 07866 US

New Mailing Address:

FEI Number: 84-1692075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

VANSCOY, ROBERT
27853 KINGS KEW SW
BONITA SPRINGS, FL 34134 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: VANSCOY, NEIL T
Address: 56 UPPER MOUNTAIN AVE
City-St-Zip: ROCKAWAY, NJ 07866 US

Title: MGRM () Delete
Name: LEAH, VANSCOY
Address: 56 UPPER MOUNTAIN AVE
City-St-Zip: ROCKAWAY, NJ 07866 US

Title: MGRM () Delete
Name: HOFFMAN, WALTER
Address: 75 RANDOLPH AVE
City-St-Zip: DOVER, NJ 07801 US

Title: MGRM () Delete
Name: HOFFMAN, DOROTHY
Address: 75 RANDOLPH AVE
City-St-Zip: DOVER, NJ 07801 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:

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: NEIL VANSCOY

MGRM

05/30/2008

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