

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107232

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: ROBERT FLIEHS LLC

**Current Principal Place of Business:**

2035 GREEN CEDAR LANE  
GENEVA, FL 327329723 US

**New Principal Place of Business:**

**Current Mailing Address:**

2035 GREEN CEDAR LANE  
GENEVA, FL 327329723 US

**New Mailing Address:**

FEI Number: 20-3731047

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLIEHS, ROBERT V  
2035 GREEN CEDAR LANE  
GENEVA, FL 327329723 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: FLIEHS, ROBERT V  
Address: 2035 GREEN CEDAR LANE  
City-St-Zip: GENEVA, FL 327329723 US

Title: MGR (X) Delete  
Name: FLIEHS, ROBERT L  
Address: 2035 GREEN CEDAR LANE  
City-St-Zip: GENEVA, FL 327329723 US

Title: MGR (X) Delete  
Name: JACOBS II, JOHNNY G  
Address: 191 HEATHER LANE  
City-St-Zip: DELTONA, FL 32738 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: ROBERT V. FLIEHS

MGRM

01/30/2008

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