## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000108527

Entity Name: 2412, LLC

City-St-Zip:

PALM BEACH, FL 33480 US

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1860 FOREST HILL BLVD. 105 WEST PALM BEACH, FL 33406 US **New Mailing Address: Current Mailing Address:** P.O. BOX 347 PALM BEACH, FL 33480 US FEI Number: 20-3790045 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MAC MAHON, DERMOT P 1860 FOREST HILL BOULEVARD SUITE NO. 105 WEST PALM BEACH, FL 33406 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition DERRIN, SCOTT Name: Name: Address: P O BOX 347 Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: MGRM Title: ( ) Delete () Change () Addition Name: LIEBERSON, RHONA DERRIN Name: Address: P O BOX 347 Address: City-St-Zip: PALM BEACH, FL 33480 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition CURRAN, STACIE DERRIN Name: Name: Address: P O BOX 347 Address:

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.

City-St-Zip:

SIGNATURE: SCOTT DERRIN MGRM 04/28/2009