## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000037990

**Current Principal Place of Business:** 

Entity Name: HEROLD FAMILY MANAGEMENT, LLC

FILED Mar 20, 2009 Secretary of State

Date

() Change () Addition

404 SAVOIE DRIVE PALM BEACH GARDENS, FL 33410 US **Current Mailing Address: New Mailing Address:** 404 SAVOIE DRIVE PALM BEACH GARDENS, FL 33410 US FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAUERBERG, ERIC M 200 VILLAGE SQUARE CROSSING SUITE 102 PALM BEACH GARDENS, FL 33410 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:

**New Principal Place of Business:** 

ADDITIONS/CHANGES:

## MANAGING MEMBERS/MANAGERS:

MGR Title: () Delete

Electronic Signature of Registered Agent

HEROLD, DAVID M MD Name: Name: Address: 404 SAVOIE DRIVE Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410 US City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: HEROLD, MELISSA M Name: Address: 404 SAVOIE DRIVE Address: PALM BEACH GARDENS, FL 33410 US City-St-Zip: 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: DAVID HEROLD 03/20/2009