

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100606

Entity Name: THE NERDEL COMPANY, LLC

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

1245 SOUTH POWERLINE ROAD
SUITE 300
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

1245 SOUTH POWERLINE ROAD
SUITE 300
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 20-5920173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COHN, ALAN B
100 WEST CYPRESS CREEK ROAD
TRADE CENTRE SOUTH, SUITE 700
FT. LAUDERDALE, FL 33309 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: CEO () Delete
Name: KESSELMAN, MARC M
Address: 1245 SOUTH POWERLINE ROAD, SUITE 300
City-St-Zip: POMPANO BEACH, FL 33069

Title: SVPD () Delete
Name: KESSELMAN, ROBIN
Address: 1245 SOUTH POWERLINE ROAD, SUITE 300
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: COHN, ALAN B
Address: 100 WEST CYPRESS CREEK ROAD STE 700
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D () Delete
Name: KESSELMAN, MARC M DR.
Address: 100 WEST CYPRESS CREEK ROAD STE 700
City-St-Zip: FT LAUDERDALE, FL 33309

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: ROBIN KESSELMAN

SVPD

03/19/2009

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