

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103038

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: ENGEL & VOELKERS FLORIDA RESIDENTIAL LLC

**Current Principal Place of Business:**

720 5TH AVENUE SOUTH  
SUITE 200  
NAPLES, FL 34102

**New Principal Place of Business:**

711 5TH AVENUE SOUTH  
SUITE 210  
NAPLES, FL 34102

**Current Mailing Address:**

720 5TH AVENUE SOUTH  
SUITE 200  
NAPLES, FL 34102

**New Mailing Address:**

711 5TH AVENUE SOUTH  
SUITE 210  
NAPLES, FL 34102

FEI Number: 20-5894166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AC GLOBAL MANAGEMENT, LLC  
5830 COPPER LEAF LANE  
NAPLES, FL 34116 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: MGR ( ) Delete  
Name: BOLSEN, STEFAN  
Address: 1178 BREAKWATER CT  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGR ( ) Delete  
Name: KHAMMASH, NARD T  
Address: 1866 MORRILL STREET  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TONN, OLIVER  
Address: 711 5TH AVENUE S. # 210  
City-St-Zip: NAPLES, FL 34102

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: OLIVER TONN

MGR

01/21/2009

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