

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050552

Entity Name: JAEGERHAUS, L.L.C.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

2735 SANTA BARBARA BLVD., SUITE 201
CAPE CORAL, FL 33914

New Principal Place of Business:

3652 TAMIAMI TRAIL N
#110
NAPLES, FL 34103

Current Mailing Address:

2735 SANTA BARBARA BLVD., SUITE 201
CAPE CORAL, FL 33914

New Mailing Address:

3652 TAMIAMI TRAIL N
#110
NAPLES, FL 34103

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, CHRISTINE F ESQ.
2735 SANTA BARBARA BLVD., SUITE 201
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

SEIDL, WERNER MGRM
3652 TAMIAMI TRAIL N
#110
NAPLES, FL 34103 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: WERNER SEIDL

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: PIAZZA, CARMELO
Address: WALTERSLEBENSERSTR. 41
City-St-Zip: 55262 HEIDESHEIM GERMANY, XX XX

Title: MGR () Delete
Name: WALTER, SILVIA
Address: HEIDESHEIMER STR. 63
City-St-Zip: 55257 BUDENHEIM GERMANY, XX XX

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: SEIDL, WERNER
Address: 3415 ANGUILLA WAY
City-St-Zip: NAPLES, FL 34119 US

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: WERNER SEIDL

MGR

04/28/2008

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