

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053254

**FILED**  
**Apr 22, 2008**  
**Secretary of State**

**Entity Name:** THE VAN EATON GROUP LLC

**Current Principal Place of Business:**

33 E CAMINO REAL  
#209  
BOCA RATON, FL 33432

**New Principal Place of Business:**

1194 HILLSBORO MILE  
#10  
HILLSBORO BEACH, FL 33062

**Current Mailing Address:**

33 E CAMINO REAL  
#209  
BOCA RATON, FL 33432

**New Mailing Address:**

1194 HILLSBORO MILE  
#10  
HILLSBORO BEACH, FL 33062

**FEI Number:** 83-0483567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAN EATON, ADAM S  
33 E CAMINO REAL  
1194 HILLSBORO MILE #10  
HILLSBORO BEACH, FL 33062 US

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

VAN EATON, ADAM S  
1194 HILLSBORO MILE  
#10  
HILLSBORO BEACH, FL 33062 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:** ADAM VAN EATON

04/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** VAN EATON, ADAM S  
**Address:** 33 E CAMINO REAL #209  
**City-St-Zip:** BOCA RATON, FL 33432

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** VAN EATON, ADAM S  
**Address:** 1194 HILLSBORO MILE #10  
**City-St-Zip:** HILLSBORO BEACH, FL 33062

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:** ADAM VAN EATON

PRES

04/22/2008

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