

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000004445

Entity Name: YACHT CLUB DRIVE LLC

FILED
Feb 04, 2009
Secretary of State

Current Principal Place of Business:

% SANDRA P. GOHN, ESQ.
6225 SMITH AVENUE
BALTIMORE, MD 21209

Current Mailing Address:

% SANDRA P. GOHN, ESQ.
6225 SMITH AVENUE
BALTIMORE, MD 21209

New Principal Place of Business:

JOHANNA EISENBERGER
4407 BEDFORD PLACE
BALTIMORE, MD 21218

New Mailing Address:

JOHANNA EISENBERGER
4407 BEDFORD PLACE
BALTIMORE, MD 21218

FEI Number: 35-2323181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: GOHN, SANDRA P
Address: 6225 SMITH AVENUE
City-St-Zip: BALTIMORE, MD 21209

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: EISENBERGER, MARIO A
Address: 4407 BEDFORD PLACE
City-St-Zip: BALTIMORE, MD 21218

Title: MGR () Change (X) Addition
Name: EISENBERGER, JOHANNA J
Address: 4407 BEDFORD PLACE
City-St-Zip: BALTIMORE, MD 21218

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: JOHANNA EISENBERGER

MGR

02/04/2009

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