

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034177

**FILED**  
**Feb 28, 2009**  
**Secretary of State**

**Entity Name:** NO. NEBRASKA REALTY LLC

**Current Principal Place of Business:**

45 SARAH DR.  
FARMINGDALE, NY 11758 US

**New Principal Place of Business:**

45 SARAH DR.  
FARMINGDALE, NY 11735 US

**Current Mailing Address:**

PO BOX 89  
OLD BETHPAGE, NY 11735 US

**New Mailing Address:**

PO BOX 89  
OLD BETHPAGE, NY 11804 US

**FEI Number:** 26-2332095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA EXECUTIVE REALTY MANAGEMENT CORP.  
5201 VILLAGE BLVD.  
WEST PALM BEACH, FL 33407 US

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

NEEDLE, DAVID  
5201 VILLAGE BLVD.  
WEST PALM BEACH, FL 33407 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: DAVID NEEDLE

02/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCHUMAN, BRIAN  
Address: PO BOX 70  
City-St-Zip: OLD BETHPAGE, NY 11804 US

**ADDITIONS/CHANGES:**

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: BRIAN SCHUMAN

MR.

02/28/2009

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