

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000043739

FILED
Apr 22, 2009
Secretary of State

Entity Name: TELLERMAN FAMILY, LLC

Current Principal Place of Business:

2600 N.E. 14TH STREET CAUSEWAY
C/O MACLEAN AND EMA
POMPAN0 BEACH, FL 33062

New Principal Place of Business:

11 CONEFLOWER LANE
WEST WINDSOR, NJ 08550

Current Mailing Address:

2600 N.E. 14TH STREET CAUSEWAY
C/O MACLEAN AND EMA
POMPAN0 BEACH, FL 33062

New Mailing Address:

11 CONEFLOWER LANE
WEST WINDSOR, NJ 08550

FEI Number: 26-2550061

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, THORNTON
2600 N.E. 14TH STREET CAUSEWAY
C/O MACLEAN AND EMA
POMPAN0 BEACH, FL 33062 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: MGRM () Delete
Name: PODOLAK, ABRAHAM
Address: 11 CONEFLOWER LANE
City-St-Zip: WEST WINDSOR, CT 08550 US

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: PODOLAK, ABRAHAM
Address: 11 CONEFLOWER LANE
City-St-Zip: WEST WINDSOR, NJ 08550 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: ABRAHAM PODOLAK

MR.

04/22/2009

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