

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000806

**FILED**  
**Apr 09, 2009**  
**Secretary of State**

**Entity Name:** GRANDVIEW HOLDINGS, L.C.

**Current Principal Place of Business:**

336 SPANISH RIVER BLVD., NW  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

484 S. MAYA PALM  
BOCA RATON, FL 33432 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

EHLERS, GENE M  
484 S MAYA PALM DR  
BOCA RATON, FL 33432 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: EHLERS, CAROLYN L  
Address: 484 MAYA PALM DR.  
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGR                      ( ) Delete  
Name: EHLERS, GENE M  
Address: 484 MAYA PALM DR  
City-St-Zip: BOCA RATON, FL 33432 US

**ADDITIONS/CHANGES:**

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

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: GENE M. EHLERS    MGR    04/09/2009

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