

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002751

FILED
Jan 08, 2007
Secretary of State

Entity Name: SCHICKEDANZ CAPITAL GROUP, L.L.C.

Current Principal Place of Business:

7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0878211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHICKEDANZ, WALDEMAR K
7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410 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: SCHICKEDANZ, W K
Address: 7741 N. MILITARY TRAIL, SUITE 1
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR () Delete
Name: SCHICKEDANZ, G H
Address: 7741 N. MILITARY TRAIL, SUITE 1
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGR () Delete
Name: FLAIG, GUNTHER
Address: 7423 MITCHELL BLVD.
City-St-Zip: NEW PORT RICHEY, FL 34655

ADDITIONS/CHANGES:

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

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 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: WK SCHICKEDANZ

MGR

01/08/2007

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