

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007340

Entity Name: DEAN VEGOSEN,P.L.

FILED  
Jan 27, 2009  
Secretary of State

**Current Principal Place of Business:**

515 N. FLAGLER DR. 18TH FLOOR  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

515 N. FLAGLER DR. 18TH FLOOR  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 65-0960582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VEGOSEN, DEAN  
515 N. FLAGLER DR. 18TH FLOOR  
WEST PALM BEACH, FL 33401 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: VEGOSEN, DEAN  
Address: 515 N. FLAGLER DR. 18TH FLOOR  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: VEGOSEN, DEAN  
Address: 515 N. FLAGLER DR. 18TH FLOOR  
City-St-Zip: WEST PALM BEACH, FL 33401

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: DEAN VEGOSEN

MGR

01/27/2009

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