

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005829

Entity Name: TRACHT FAMILY L.L.C.

FILED  
Apr 29, 2008  
Secretary of State

**Current Principal Place of Business:**

7019 INWOOD RD  
DALLAS, TX 75209

**New Principal Place of Business:**

**Current Mailing Address:**

7019 INWOOD RD  
DALLAS, TX 75209

**New Mailing Address:**

FEI Number: 58-2617454

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SCHEMBRI, JENIFER  
240 S PINEAPPLE AVENUE  
10TH FLOOR  
SARASOTA, FL 34236 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: TRACHT, CARTER B  
Address: 7019 INWOOD ROAD  
City-St-Zip: DALLAS, TX 75209

Title: MGRM ( ) Delete  
Name: TRACHT, STAN G  
Address: 6923 INWOOD ROAD  
City-St-Zip: DALLAS, TX 75209

Title: MGRM ( ) Delete  
Name: TRACHT, TINSLEY L  
Address: 35 TALL TREES COURT  
City-St-Zip: SARASOTA, FL 34232

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: TRACHT, STAN G  
Address: 26 TENNIS VILLAGE DR  
City-St-Zip: HEATH, TX 75032

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: CARTER TRACHT

MGRM

04/29/2008

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