

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016980

FILED
Apr 25, 2008
Secretary of State

Entity Name: FRANCO WALLACE & PACKER, PL

Current Principal Place of Business:

8751 WEST BROWARD BOULEVARD
410
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

8751 WEST BROWARD BOULEVARD
410
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-1152215

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCO, LAWRENCE A
8751 WEST BROWARD BOULEVARD
410
PLANTATION, FL 33324 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: THE LAW OFFICES OF L, AWRENCE A. FRA N CO, PA
Address: 8751 WEST BROWARD BOULEVARD, 410
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Delete
Name: SCOTT R. WALLACE, PA,
Address: 8751 WEST BROWARD BOULEVARD, SUITE 410
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Delete
Name: CRAIG PACKER, P.A.,
Address: 8751 W. BROWARD BLVD #410
City-St-Zip: PLANTATION, FL 33324

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 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: LAWRENCE FRANCO

MGRM

04/25/2008

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