

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021769

FILED
Apr 14, 2009
Secretary of State

Entity Name: FRIENDSHIP, LLC

Current Principal Place of Business:

27231 RIDGE LAKE COURT
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

27231 RIDGE LAKE COURT
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 80-0024899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUGUSTINE, ROBERT
27231 RIDGE LAKE CT
BONITA SPRINGS, FL 34134 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: AUGUSTINE, ROBERT
Address: 27231 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: SHELLNBARGER, DAVID F
Address: 27231 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: THEORIN, LORRAINE L
Address: 27231 RIDGE LK CT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: SHELLNBARGER, MARY K
Address: 27231 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: FENWICK, SHERIDAN
Address: 27231 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: THEORIN, CARL
Address: 27231 RIDGE LAKE COURT
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES:

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

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

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

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

Title: () Change () Addition
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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: LORRAINE LEVITT THEORIN

TREA

04/14/2009

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