
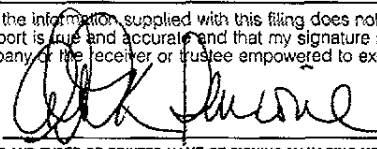


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000022512		
1. Entity Name FRANKLIN & COMPANY PROPERTY MANAGEMENT, L.L.C.		
Principal Place of Business 4112 LAMSON AVENUE SPRING HILL, FL 34608 US	Mailing Address 4112 LAMSON AVENUE SPRING HILL, FL 34608	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent PERRICONE, DEBRA K 4112 LAMSON AVENUE SPRING HILL, FL 34608		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERRICONE, DEBRA 4112 LAMSON AVE SPRING HILL, FL 34608	DO NOT WRITE IN THIS SPACE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		4/12/06 3526848884
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>



03072006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
68-0528321

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

U000000549954
05/13/06-80040-020 50.00