

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022574

Entity Name: FCFR PROPERTIES, LLC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

5750 5TH AVE. NORTH
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

5750 5TH AVE. NORTH
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 06-1646639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREIGHTON, ROBERT
5750 5TH AVENUE N.
SAINT PETERSBURG, FL 33710 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: VP () Delete
Name: MARTIN PORT 2003 TRUST
Address: 4812 BEACHWAY DR
City-St-Zip: TAMPA, FL 33609

Title: P () Delete
Name: CREIGHTON, ROBERT E
Address: 5750 5TH AVE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: VP () Delete
Name: BARBARA PORT 2003 TRUST
Address: 4812 BEACH WAY DR
City-St-Zip: TAMPA, FL 33609

Title: S () Delete
Name: RIVERA, JUAN J
Address: 6331 STATE ROAD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T () Delete
Name: FRIEDMAN, KENNETH
Address: 1700 MC MULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

Title: V () Delete
Name: FRIEDMAN, KENNETH
Address: 1700 MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

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:

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

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

Title: V (X) Change () Addition
Name: FLEETER, MICHAEL
Address: 7243 HIGHWAY 301 S.
City-St-Zip: RIVERVIEW, FL 33569

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: ROBERT CREIGHTON

P

04/03/2009

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