

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032934

Entity Name: FRANCES JEFFREY, L.L.C.

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

2316 PINE RIDGE ROAD  
346  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

2316 PINE RIDGE ROAD  
346  
NAPLES, FL 34109

## New Mailing Address:

FEI Number: 36-4518302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHORRALL, SCOTT  
325 DUNES BLVD #905  
NAPLES, FL 34110 US

## Name and Address of New Registered Agent:

WHORRALL, SCOTT  
15541 VALLECAS LANE  
NAPLES, FL 34110 US

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: SCOTT WHORRALL

04/24/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WHORRALL, SCOTT J  
Address: 325 DUNES BLVD #905  
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Delete  
Name: WHORRALL, PAIGE  
Address: 6079 SHALLOWS WAY  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WHORRALL, SCOTT J  
Address: 15541 VALLECAS LANE  
City-St-Zip: NAPLES, FL 34110

Title: MGR (X) Change ( ) Addition  
Name: NICHOLS, PAIGE  
Address: 331 DOVER PLACE #202  
City-St-Zip: NAPLES, FL 34104

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: SCOTT WHORRALL

MGRM

04/24/2008

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