

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 30, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000032680

1. Entity Name
FAMILY FUTURES, LLC



Principal Place of Business
**1175 S. U.S. HIGHWAY 1
VERO BEACH, FL 32962**

Mailing Address
**1175 S. U.S. HIGHWAY 1
VERO BEACH, FL 32962**



08282006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|--|
| 4. FEI Number 52-2406640 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

**BLODIG, GREGORY J
100 W. CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE, FL 33309**

**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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

U00000575667
09/30/06-80004-002 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|-------------------------------|
| TITLE | MGR |
| NAME | JANKE, WALTER |
| STREET ADDRESS | 1175 S. U.S. HIGHWAY 1 |
| CITY-ST-ZIP | VERO BEACH, FL 32962 |

| | |
|----------------|-------------------------------|
| TITLE | MGR |
| NAME | JANKE, LALITA |
| STREET ADDRESS | 1175 S. U.S. HIGHWAY 1 |
| CITY-ST-ZIP | VERO BEACH, FL 32962 |

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**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8/28/06 772-794-0030

Date

Daytime Phone #