2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057641

Entity Name: FARA , LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1337 NE 33R TERR CAPE CORAL, FL 33909	2204 NW 7TH TER CAPE CORAL, FL 33993

Current Mailing Address:	**New Mailing Address:**
1337 NE 33R TERR CAPE CORAL, FL 33909	2204 NW 7TH TER CAPE CORAL, FL 33993

FEI Number: 20-1446411   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
FERDINAND, ACKERMANN MGRM 1337 NE 33R TERR CAPE CORAL, FL 33909 US	FERDINAND, ACKERMANN MGRM 2204 NW 7TH TER CAPE CORAL, FL 33993 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: FERDINAND ACKERMANN   04/13/2009

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	WICKRAMASINGHE, RITA	Name:	WICKRAMASINGHE, RITA
Address:	1337 NE 33R TERR	Address:	MANAGAMA RD
City-St-Zip:	CAPE CORAL, FL 33909	City-St-Zip:	COLOMBO 7, SL SRI LANKA

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	ACKERMANN, FERDINAND	Name:	ACKERMANN, FERDINAND
Address:	1337 NE 33R TERR	Address:	GROSSMUNSTERPLATZ 1
City-St-Zip:	CAPE CORAL, FL 33909	City-St-Zip:	ZURICH, CH 8002 CH

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: FERDINAND ACKERMANN   MGRM   04/13/2009

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