#### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000080266

1. Entity Name F & A LLC

FILED Apr 06, 2007 08:00 A Secretary of State

Principal Place of Business

5220 BRITTANY DRIVE S. BUILDING 5, UNIT 304 ST. PETERSBURG, FL 33715 Mailing Address

5220 BRITTANY DRIVE S. BUILDING 5, UNIT 304 ST. PETERSBURG, FL 33715



03262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-1853623		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

### DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VAN WINKLE, MARY E 2815 PROCTOR ROAD SARASOTA, FL 34231

# DO NOT WRITE IN THIS SPACE

	ve named entity submits this statement for the purpose of chang pations of registered agent.	ging its registered office or registered agent, or bo	m, in the State of Florida Transflamiliar with, and accept
SIGNATUR		(NOTE Parents of Face and American and Ameri	OATE
	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 May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR FRAZIER, ROBERT C SR. 5220 BRITTANY DRIVE S., BLDG. 5, UNIT 304 ST. PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FRAZIER, CONNIE 3286 EDINGTON ROAD FAIRLAWN, OH 44333
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NEWBAUER, JEROME 1459 KARL ROAD COPLEY, OH 44321
TITLE NAME STREET ADDRESS CITY-S1-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	

000000693250 04/16/07-80032-014 50.00

# DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 eath; 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: Walnte France

ROBERT C. FRAZIER

03/26/07

330-666-0337

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

Date

Daytime Phone #