

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090251

Entity Name: FRANCHISE RESALES, LLC

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

4837 SWIFT ROAD SUITE 200
SARASOTA, FL 34239

New Principal Place of Business:

1990 MAIN STREET, STE 750
SARASOTA, FL 34236

Current Mailing Address:

4837 SWIFT ROAD SUITE 200
SARASOTA, FL 34239

New Mailing Address:

P. O. BOX 25096
SARASOTA, FL 34277

FEI Number: 20-2019273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTEP, NANCY
4837 SWIFT ROAD, STE. 200
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

ESTEP, NANCY
2725 SIESTA DRIVE
SARASOTA, FL 34239 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: _____

04/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SOURCE FIRST, INC.
Address: 4837 SWIFT ROAD SUITE 200
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SOURCE FIRST, INC.
Address: 2725 SIESTA DRIVE
City-St-Zip: SARASOTA, FL 34239

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: NANCY ESTEP

PRES

04/23/2009

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