

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000035531

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** PPD FAMILY TRUST LLC

**Current Principal Place of Business:**

121 BUENA VISTA COURT  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

121 BUENA VISTA COURT  
ISLAMORADA, FL 33036

**New Mailing Address:**

**FEI Number:** 16-1732387

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PISARIS, DIANA J  
121 BUENA VISTA COURT  
ISLAMORADA, FL 33036 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DAVIS, MATTHEW  
**Address:** 15795 SAN ANTONIO COURT  
**City-St-Zip:** FT. MYERS, FL 33908

**Title:** MGRM  
**Name:** PISARIS, PETER PISARIS  
**Address:** 121 BUENA VISTA COURT  
**City-St-Zip:** ISLAMORADA, FL 33036

**Title:** MGRM  
**Name:** PISARIS, NICHOLAS  
**Address:** 4141 LA PLAYA BLVD.  
**City-St-Zip:** COCONUT GROVE, FL 33133

**Title:** MGRM  
**Name:** PISARIS, DIANA J  
**Address:** 121 BUENA VISTA COURT  
**City-St-Zip:** ISLAMORADA, FL 33036

I hereby 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:** DIANA J PISARIS

MGRM

01/08/2010

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