

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 16, 2008  
Secretary of State**

DOCUMENT# L05000056186

Entity Name: FRANKENWYTE, LLC

**Current Principal Place of Business:**

555 SOUTH FEDERAL HIGHWAY  
SUITE 450  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

555 SOUTH FEDERAL HIGHWAY  
SUITE 450  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 11-3752383      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WHITE, CHARLES G  
555 SOUTH FEDERAL HIGHWAY  
SUITE 450  
BOCA RATON, FL 33432 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: WHITE, CHARLES G  
Address: 555 SOUTH FEDERAL HIGHWAY  
City-St-Zip: BOCA RATON, FL 33432 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: FRANKLE, DIANE  
Address: 949 SEAGATE DRIVENE  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHARLES G. WHITE

MGRM

07/16/2008

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