


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 04, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L05000064047</b> 1. Entity Name <b>FRANCO FAMILY FINANCIAL SERVICES LLC</b>	
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Principal Place of Business <b>1212 66TH STREET SAINT PETERSBURG, FL 33710 US</b>	Mailing Address <b>531 53RD STREET NORTH SAINT PETERSBURG, FL 33710 US</b>
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04112007 No Chg-LLC CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <b>Not Applicable</b>
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>FRANCO, ALBERT 531 53RD STREET NORTH SAINT PETERSBURG, FL 33710</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **5-2-07**

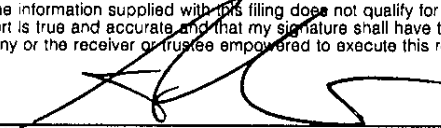
**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000761025  
05/25/07-80038-023 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM FRANCO, ALBERT 531 53RD STREET NORTH SAINT PETERSBURG, FL 33710</b>
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**5-2-07 721-385-9188**