

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000068412

1. Entity Name
E.F.N. MANAGEMENT, LLC



Principal Place of Business
1220 NW 12TH STREET
GAINESVILLE, FL 32601

Mailing Address
1220 NW 12TH STREET
GAINESVILLE, FL 32601



03122008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
90-0249823

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEGRIN, ESTHER F
1220 NW 12TH STREET
GAINESVILLE, FL 32601

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR NEGRIN, ESTHER F 1220 NW 12TH STREE GAINESVILLE, FL 32601 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR ANDERSON, DARRELL H 1220 NW 12TH ST GAINESVILLE, FL 32601 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR SILBER-ANDERSON, RACHEL 1220 NW 12TH ST GAINESVILLE, FL 32601 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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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: *Esther Negrin* ESTHER NEGRIN

4/9/08 352-371-3636