

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068820

FILED
Jan 19, 2009
Secretary of State

Entity Name: THE FRISKNEY FAMILY TRUST, LLC

Current Principal Place of Business:

1605 E CLASSICAL BLVD.
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1605 E CLASSICAL BLVD.
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRISKNEY, ROBERT L
1605 E CLASSICAL BLVD.
DELRAY BEACH, FL 33445 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 () Delete
Name: FRISKNEY, ROBERT L
Address: 1605 E CLASSICAL BLVD.
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGRM () Delete
Name: FRISKNEY, MELISSA J
Address: 1605 E CLASSICAL BLVD.
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES:

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

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: MELISSA FRISKNEY MGRM 01/19/2009

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