

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071691

FILED
Apr 24, 2006
Secretary of State

Entity Name: FAULKNER FAMILY PARTNERSHIP, LLC

Current Principal Place of Business:

C/O FAULKNER CAPITAL MANAGEMENT, LLC
790 E. BROWARD BOULEVARD, STE 201
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

C/O FAULKNER CAPITAL MANAGEMENT, LLC
790 E. BROWARD BOULEVARD, STE 201
FORT LAUDERDALE, FL 33301

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:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD, SUITE 221E
PALM BEACH GARDENS, FL 33410 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: FAULKNER, J. DOUGLAS
Address: 790 E. BROWARD BOULEVARD, SUITE 201
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: J. DOUGLAS FAULKNER MGR 04/24/2006

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