2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2009
Secretary of State

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Entity Name: AMRAK INVESTMENTS, LLC

Current Principal Place of Business:

C/O FOLEY & LARDNER LLP/ATTN: R.J. WOLFE
100 N. TAMPA STREET, SUITE 2700
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

C/O FOLEY & LARDNER LLP/ATTN: R.J. WOLFE
POST OFFICE BOX 3391
TAMPA, FL 33601

New Mailing Address:

FEI Number: 20-3260508 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F & L CORP
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 32202 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:	MGR	( ) Delete
Name:	CHRYSOCHOOS, JACQUES	
Address:	100 N. TAMPA STREET, SUITE 2700	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGR	( ) Delete
Name:	SONNENSCHEIN, THOMAS F	
Address:	100 N. TAMPA STREET, SUITE 2700	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGR	( ) Delete
Name:	OAKLAND, CHRISTINE	
Address:	100 N. TAMPA STREET, SUITE 2700	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGR	( ) Delete
Name:	STIERS, KIMBERLY N	
Address:	100 N. TAMPA STREET, SUITE 2700	
City-St-Zip:	TAMPA, FL 33602	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: THOMAS F. SONNENSCHEIN MGR 02/10/2009

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