

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098310

Entity Name: SFA MANAGEMENT, LLC

FILED  
Apr 29, 2009  
Secretary of State

## Current Principal Place of Business:

1611 12TH STREET EAST  
UNIT B  
PALMETTO, FL 34221

## New Principal Place of Business:

## Current Mailing Address:

1611 12TH STREET EAST  
UNIT B  
PALMETTO, FL 34221

## New Mailing Address:

FEI Number: 20-3872740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHIRK, PETER J  
17 TIDY ISLAND BOULEVARD  
BRADENTON, FL 34210 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: SHIRK, PETER J  
Address: 17 TIDY ISLAND BOULEVARD  
City-St-Zip: BRADENTON, FL 34210 US

Title: MGRM ( ) Delete  
Name: PICKARD, FREDERICK R  
Address: 303 WEST MADISON STE 400  
City-St-Zip: CHICAGO, IL 60606

Title: MGRM ( ) Delete  
Name: MURPHY, THOMAS  
Address: 303 WEST MADISON STE 400  
City-St-Zip: CHICAGO, IL 60606 US

Title: MGRM ( ) Delete  
Name: GILMARTIN, WAYNE  
Address: 59 TIDY ISLAND BOULEVARD  
City-St-Zip: BRADENTON, FL 34210 US

## 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: PETER SHIRK

MGRM

04/29/2009

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