

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000120239

Entity Name: FAMMAD, LLC

FILED
Feb 19, 2008
Secretary of State

Current Principal Place of Business:

% CDL
505 SOUTH FLAGLER DRIVE, SUITE 910
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

% CDL
505 SOUTH FLAGLER DRIVE, SUITE 910
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 20-3943322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401 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: FLOYD, MARIA K
Address: C/O CDL 305 S FLAGLER ST STE 900
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FLOYD, MARIA K
Address: C/O CDL 505 S FLAGLER ST STE 900
City-St-Zip: WEST PALM BEACH, FL 33401

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: MARIA K FLOYD

MGR

02/19/2008

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