

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000007024

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Entity Name:** FRANKLIN MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

7194 SEMINOLE BLVD  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4697  
SEMINOLE, FL 33775

**New Mailing Address:**

**FEI Number:** 20-4503665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRANKLIN, LARRY A  
9730 SAGO PT DR  
LARGO, FL 33777 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  
**Name:** FRANKLIN, LARRY A  
**Address:** P O BOX 4697  
**City-St-Zip:** SEMINOLE, FL 33775

**Title:** MGRM  
**Name:** FRANKLIN, MATTHEW T  
**Address:** 5648 BAY STREET, UNIT 424  
**City-St-Zip:** EMERYVILLE, CA 94608

**Title:** MGRM  
**Name:** JOHNSON, MICHELLE L  
**Address:** 7258 SEDGEFIELD AVE  
**City-St-Zip:** SAN RAMON, CA 94583

**Title:** MGRM  
**Name:** MOTEN, MARIA A  
**Address:** 624 BLACK LION DRIVE, N.E.  
**City-St-Zip:** ST. PETERSBURG, FL 33716

I hereby 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:** LARRY A. FRANKLIN

MGRM

04/06/2010

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