

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073369

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: FRANGOS PROPERTIES, LLC

**Current Principal Place of Business:**

P.O. BOX 536  
CAMPBELL, OH 44405 US

**New Principal Place of Business:**

24 MADISON ST  
CAMPBELL, OH 44405 US

**Current Mailing Address:**

P.O. BOX 536  
CAMPBELL, OH 44405 US

**New Mailing Address:**

FEI Number: 20-5441249      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
1111 LINCOLN RD.,  
SUITE 400  
MIAMI BEACH, FL 33139 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: FRANGOS, IRENE  
Address: P.O. BOX 536  
City-St-Zip: CAMPBELL, OH 44405 US

Title: MGRM ( ) Delete  
Name: KALIKATZAROS, CHRISTINE  
Address: P.O. BOX 536  
City-St-Zip: CAMPBELL, OH 44405 US

Title: MGRM ( ) Delete  
Name: FRANGOS, NIKOLAOS  
Address: P.O. BOX 536  
City-St-Zip: CAMPBELL, OH 44405 US

Title: MGRM ( ) Delete  
Name: FRANGOS, EMANOUEL  
Address: P.O. BOX 536  
City-St-Zip: CAMPBELL, OH 44405 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 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: IRENE FRANGOS

MGRM

01/10/2007

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