

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089388

FILED
Mar 19, 2009
Secretary of State

Entity Name: ANGEL TRUMP FOUNDATION LC

Current Principal Place of Business:

3673 E. EAGLE COVE COURT
HERNANDO, FL 34442 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1984
INVERNESS, FL 34451 US

New Mailing Address:

FEI Number: 52-6946196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDETTE, ARMAND R
3673 E. EAGLE COVE COURT
HERNANDO, FL 34442 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: FREDETTE, ARMAND R
Address: 3673 E. EAGLE COVE COURT
City-St-Zip: HERNANDO, FL 34442 US

Title: MGR () Delete
Name: FREDETTE, HELEN T
Address: 3673 E. EAGLE COVE COURT
City-St-Zip: HERNANDO, FL 34442 US

Title: MGR () Delete
Name: FREDETTE, EDWARD A
Address: P.O. BOX 1984
City-St-Zip: INVERNESS, FL 34451 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:

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: ARMAND R. FREDETTE

MGR

03/19/2009

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