

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100865

FILED  
Jan 11, 2009  
Secretary of State

**Entity Name:** BOLDIN-BANKS FAMILY ENTERPRISES, LLC

**Current Principal Place of Business:**

600 CALIFORNIA STREET  
18TH FLOOR  
SAN FRANCISCO, CA 94108 US

**New Principal Place of Business:**

**Current Mailing Address:**

600 CALIFORNIA STREET  
18TH FLOOR  
SAN FRANCISCO, CA 94108 US

**New Mailing Address:**

**FEI Number:** 20-5727866

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMON, MICHAEL W  
3839 NW BOCA RATON BLVD  
100  
BOCA RATON, FL 33431 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: BOLDIN, ANQUAN  
Address: 600 CALIFORNIA STREET, C/O CSI, 18TH FLOOR  
City-St-Zip: SAN FRANCISCO, CA 94108 US

Title: MGR ( ) Delete  
Name: BANKS, ROBERT L JR.  
Address: 3073 ELDORADO DRIVE  
City-St-Zip: PAHOKEE, FL 33476 US

Title: MGR ( ) Delete  
Name: BANKS, BRENDA  
Address: 4157 ONEGA CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR ( ) Delete  
Name: BANKS, DONALD  
Address: 4157 ONEGA CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: MGR ( ) Delete  
Name: BANKS-JACKSON, TAMMIE  
Address: 296 CARISSA DRIVE  
City-St-Zip: PAHOKEE, FL 33476 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:

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: TAMMIE BANKS JACKSON

MGR

01/11/2009

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