

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013918

Entity Name: PARTNERS TRUST, LLC

FILED  
May 04, 2009  
Secretary of State

**Current Principal Place of Business:**

2650 FOWLER STREET  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4357  
N. FORT MYERS, FL 33918

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

DUNCAN, GORDON  
1601 JACKSON STREET  
SUITE 101  
FORT MYERS, FL 33901 US

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: GATTUSO, MICHAEL  
Address: 1206 NE 14TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM ( ) Delete  
Name: STIGER, TODD  
Address: 1206 NE 14TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33909

**ADDITIONS/CHANGES:**

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: MICHAEL GATTUSO

MGRM

05/04/2009

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