

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000027886

Entity Name: FRANKENRICK LLC

FILED
Jul 11, 2008
Secretary of State

Current Principal Place of Business:

323 E. ROMANA STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

323 E. ROMANA STREET
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 20-8725225 FEI Number Applied For () FEI Number Not Applicable () 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:

JESMONTH, RICHARD E
323 E. ROMANA STREET
PENSACOLA, FL 32502 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: JESMONTH, RICHARD E
Address: 323 E. ROMANA STREET
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM () Delete
Name: STATON, KENNETH E JR.
Address: 2172 W. NINE MILE ROAD, #395
City-St-Zip: PENSACOLA, FL 32534

Title: MGRM () Delete
Name: BOYKIN, FRANK W
Address: 207 LAURA LANE
City-St-Zip: GULF BREEZE, FL 32561

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: RICHARD E. JESMONTH

MGRM

07/11/2008

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