

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091694

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: FISTER FAMILY CONDO, LLC

## Current Principal Place of Business:

3554 OCEAN DRIVE  
302S  
VERO BEACH, FL 33326

## New Principal Place of Business:

## Current Mailing Address:

401 LEWIS HARGETT CIRCLE  
SUITE 110  
LEXINGTON, KY 40503

## New Mailing Address:

FEI Number: 26-1266515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STUART M. SLUTSKY, P.A.  
2500 WESTON ROAD, SUITE 404  
WESTON, FL 33331 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: FISTER, LOUIS E JR  
Address: 3205 BLENHEIM WAY  
City-St-Zip: LEXINGTON, KY 40503

Title: MGR ( ) Delete  
Name: FISTER-MESCH, KIM  
Address: 2201 BARNWELL LANE  
City-St-Zip: LEXINGTON, KY 40513

Title: MGR ( ) Delete  
Name: KAREN, FISTER D  
Address: 1685 CHANDLER LANE  
City-St-Zip: LEXINGTON, KY 40504

Title: MGR ( ) Delete  
Name: FISTER, PAUL R  
Address: 3509 WESTMONT CIRCLE  
City-St-Zip: LEXINGTON, KY 40513

## 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 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: LOUIS E. FISTER, JR.

PRES

01/21/2009

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