

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115810

Entity Name: CF LEASES, LLC

FILED  
Mar 29, 2009  
Secretary of State

**Current Principal Place of Business:**

4244 HYACINTH CIRCLE NORTH  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

4244 HYACINTH CIRCLE NORTH  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 42-1746068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

FAULCONER, CHARLES H  
3462 INNET COURT  
TEQUESTA, FL 33469 US

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

FAULCONER, CHARLES H  
3462 INLET COURT  
TEQUESTA, FL 33469 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:

03/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FAULCONER, CHARLOTTE K  
Address: 4244 HYACINTH CIRCLE NORTH  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM ( ) Delete  
Name: FAULCONER, CHARLES H  
Address: 3462 INLET COURT  
City-St-Zip: TEQUESTA, FL 33469

Title: MGRM ( ) Delete  
Name: FAULCONER, MARK K  
Address: 3882 BLUEBELL STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: FAULCONER, MARK K  
Address: 4244 HYACINTH CIRCLE NORTH  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: CHARLES H. FAULCONER

MGRM

03/29/2009

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