2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# L08000003976

Entity Name: FRIENDS THREE OF US LLC

Current Principal Place of Business:

4244 W. TENNESSEE ST.
#205
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

4244 W. TENNESSEE ST.
#205
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 26-1742379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLETS, EUNICE
2825 SW 22ND AVE.
STE. 105
DELRAY BEACH, FL 33445 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:	POOS, BELA	
Address:	4244 W. TENNESSEE ST. #205	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGRM	( ) Delete
Name:	BANGO, ZSOLT LASZLO	
Address:	4244 W. TENNESSEE ST. #205	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGRM	( ) Delete
Name:	DAVID, FERENC	
Address:	4244 W. TENNESSEE ST. #205	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGRM	( ) Delete
Name:	VINCZE, LIVIA	
Address:	4244 W. TENNESSEE ST. #205	
City-St-Zip:	TALLAHASSEE, FL 32304	
Title:	MGRM	( ) Delete
Name:	TOTH, NOEMI	
Address:	4244 W. TENNESSEE ST. #205	
City-St-Zip:	TALLAHASSEE, FL 32304	

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: BELA POOS MGRM 03/27/2009

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