

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019599

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: THREE SISTERS STABLE LLC

**Current Principal Place of Business:**

690 BLUEBIRD LANE  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

690 BLUEBIRD LANE  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 20-8799728      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FRIONA, PAULA  
690 BLUEBIRD LANE  
PLANTATION, FL 33324      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: FRIONA, PAULA  
Address: 690 BLUEBIRD LANE  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM ( ) Delete  
Name: FRIONA, MARY  
Address: 392 TRACEY LANE  
City-St-Zip: GRAND ISLAND, NY 14072

Title: MGRM (X) Delete  
Name: ACETI, TERI  
Address: 110 NE 19TH AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: FRIONA, MARY  
Address: 88 BISHOP GATE  
City-St-Zip: GRAND ISLAND, NY 14072

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: PAULA FRIONA

MGMR

04/30/2009

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