

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086396

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: AMF FAMILY REALTY, LLC

**Current Principal Place of Business:**

1951 NW 19TH STREET  
SUITE 200  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

1951 NW 19TH STREET  
SUITE 200  
BOCA RATON, FL 33431 US

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

TESCHER, DONALD R  
2101 CORPORATE BLVD.  
SUITE 107  
BOCA RATON, FL 33431 US

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

T & S REGISTERED AGENTS, LLC  
4855 TECHNOLOGY WAY, SUITE 720  
BOCA RATON, FL 33431 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: DONALD R. TESCHER

04/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: FALCONE, ARTHUR  
Address: 1951 NW 19TH STREET, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

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: ARTHUR FALCONE

MGR

04/20/2009

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