

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000099935

FILED
Sep 01, 2009
Secretary of State

Entity Name: FRANTZ TAX SERVICES LLC.

Current Principal Place of Business:

31257 SATINLEAF RUN
BROOKSVILLE, FL 34602 US

New Principal Place of Business:

Current Mailing Address:

31257 SATINLEAF RUN
BROOKSVILLE, FL 34602 US

New Mailing Address:

7117 U. S. 31 SOUTH
INDIANAPOLIS, IN 46227

FEI Number: 26-3602585 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FRANTZ, CHRISTOPHER J
31257 SATINLEAF RUN
BROOKSVILLE, FL 34602 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: FRANTZ, CHRISTOPHER J
Address: 31257 SATINLEAF RUN
City-St-Zip: BROOKSVILLE, FL 34602 US

Title: MGRM () Delete
Name: FRANTZ, TERRY J
Address: 7402 BROADVIEW DR
City-St-Zip: INDIANAPOLIS, IN 46227 US

ADDITIONS/CHANGES:

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: CHRISTOPHER J FRANTZ

MGRM

09/01/2009

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