

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000040903

Entity Name: FACT PROPERTIES, LLC

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3321 SUNSET KEY CIRCLE #506  
PUNTA GORDA, FL 33955

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GARY A. KAHLE  
99 NESBIT STREET  
PUNTA GORDA, FL 33955

**New Mailing Address:**

FEI Number: 27-0150932

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAHLE, GARY A ESQ.  
FARR LAW FIRM  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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: MGR  
Name: LYONS, THOMAS  
Address: 3321 SUNSET KEY CIRCLE, #506  
City-St-Zip: PUNTA GORDA, FL 33955

Title: MGR  
Name: LINDEMANN, CRAIG  
Address: 16 VAN FLEET ROAD  
City-St-Zip: NESHANIC STATION, NJ 08873

I hereby 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: CRAIG LINDEMANN

MGR

02/25/2011

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