

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000029683

FILED
Mar 21, 2011
Secretary of State

Entity Name: FAMILY TRUST OF CENTRAL FLORIDA, LLC

Current Principal Place of Business:

19302 GUNN HWY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

P O BOX 128
ODESSA, FL 33556

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CENTRAL FLORIDA PRIVATE EQUITY, LLC
19302 GUNN HWY
ODESSA, FL 33556 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: HOWELL, GAILE R
Address: 19302 GUNN HWY
City-St-Zip: ODESSA, FL 33556 US

Title: MGR
Name: HOWELL, KEVIN E JR
Address: 19302 GUNN HWY
City-St-Zip: ODESSA, FL 33556

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: KEVIN E HOWELL JR

MGR

03/21/2011

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