

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000084947

FILED  
Mar 22, 2011  
Secretary of State

**Entity Name:** THE FRANKLIN SHOPS ON FIRST STREET LLC

**Current Principal Place of Business:**

2200 FIRST STREET  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

2200 FIRST STREET  
FORT MYERS, FL 33901

**New Mailing Address:**

PO BOX 9  
CAPTIVA, FL 33924

**FEI Number:** 27-3232959

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMPBELL, ALLISON  
2200 FIRST STREET  
FORT MYERS, FL 33901 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  
Name: CAMPBELL, ALLISON  
Address: 3943 HIDDEN ACRES CRL  
City-St-Zip: FORT MYERS, FL 33903

Title: MGRM  
Name: MIVILLE, RENE  
Address: PO BOX 9  
City-St-Zip: CAPTIVA, FL 33924

Title: MGRM  
Name: THYE-MIVILLE, MARGARETHE  
Address: PO BOX 9  
City-St-Zip: CAPTIVA, FL 33924

Title: MGRM  
Name: HALL, ELLA  
Address: PO BOX 762  
City-St-Zip: CAPTIVA, FL 33924

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: ALLISON CAMPBELL

MGRM

03/22/2011

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