2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# L99000002144

Entity Name: FIRSTRUST, LLC.

Current Principal Place of Business:

1673 MASON AVE.
#100
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

1673 MASON AVE.
#100
DAYTONA BEACH, FL 32117

New Mailing Address:

FEI Number: 59-3567463 **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:

KOENIG, MICHAEL T
1673 MASON AVE.
#100
DAYTONA BEACH, FL 32117 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:	KOENIG, MICHAEL T JTE	
Address:	1673 MASON AVE., #100	
City-St-Zip:	DAYTONA BEACH, FL 32117 US	
Title:	MGRM	( ) Delete
Name:	CANNON, MICHELLE R	
Address:	1673 MASON AVE., #100	
City-St-Zip:	DAYTONA BEACH, FL 32117 US	
Title:	MGR	( ) Delete
Name:	THE KOENIG FAMILY DYNASTY TRUST	
Address:	1525 CLAPTON DRIVE	
City-St-Zip:	DELAND, FL 32720 US	
Title:	MGRM	( ) Delete
Name:	CANNON, CHRISTOPHER W	
Address:	1673 MASON AVE., #100	
City-St-Zip:	DAYTONA BEACH, FL 32117 US	
Title:	MGR	( ) Delete
Name:	C&M ACQUISITIONS, LLC	
Address:	1673 MASON AVE., #100	
City-St-Zip:	DAYTONA BEACH, FL 32117 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: MICHAEL T KOENIG MGRM 06/16/2009

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