

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000008940

FILED  
Jan 26, 2009  
Secretary of State

Entity Name: ALLEN FAMILY HOLDINGS, L.L.C.

## Current Principal Place of Business:

1674 SABAL PALM DRIVE  
SANIBEL ISLAND, FL 33957

## New Principal Place of Business:

## Current Mailing Address:

4708 EASTWOOD CIRCLE  
MINNETONKA, MN 55345

## New Mailing Address:

FEI Number: 65-1018940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, WILLIAM M II  
1674 SABAL PALM DRIVE  
SANIBEL ISLAND, FL 33957 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 ( ) Delete  
Name: ALLEN, WILLIAM M II  
Address: 1674 SABAL PALM DRIVE  
City-St-Zip: SANIBEL ISLAND, FL 33957

Title: MGR ( ) Delete  
Name: ALLEN, ADALINE H  
Address: 1674 SABAL PALM DRIVE  
City-St-Zip: SANIBEL ISLAND, FL 33957

Title: MGR ( ) Delete  
Name: ALLEN-SHINKLE, ADALINE  
Address: 4708 EASTWOOD CIRCLE  
City-St-Zip: MINNETONKA, MN 55345

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: SHINKLE, ADALINE ALLEN  
Address: 4708 EASTWOOD CIRCLE  
City-St-Zip: MINNETONKA, MN 55345

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: ADALINE ALLEN SHINKLE

MGR

01/26/2009

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