

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000710

FILED
Jan 04, 2008
Secretary of State

Entity Name: FARMTON MANAGEMENT LLC

Current Principal Place of Business:

C/O MIAMI CORP.
410 N. MICHIGAN AVE., ROOM 590
CHICAGO, IL 60611

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI CORP.
410 N. MICHIGAN AVE., ROOM 590
CHICAGO, IL 60611

New Mailing Address:

FEI Number: 61-1417381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNDERHILL, EARL M
1625 MAYTOWN RD.
OSTEEN, FL 32764 US

Name and Address of New Registered Agent:

UNDERHILL, EARL M
1625 OSTEEN-MAYTOWN RD.
OSTEEN, FL 32764 US

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:

01/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RAU, JOHN
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

Title: MGR () Delete
Name: HOGAN, RICHARD F
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

Title: MGR () Delete
Name: CARR, WALTER S
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

Title: MGR () Delete
Name: GOERING, BARBRA
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

Title: MGR () Delete
Name: LONG, CHRISTINE M
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

Title: MGR () Delete
Name: GAGLIARDI, PATRICIA A
Address: 410 N. MICHIGAN AVE.
City-St-Zip: CHICAGO, IL 60611

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
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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: BARBRA GOERING

MGR

01/04/2008

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