

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000003180

Entity Name: FMP TALLAHASSEE LLC

FILED
Jun 17, 2010
Secretary of State

Current Principal Place of Business:

1010 NORTHERN BLVD
STE 314
GREAT NECK, NY 11021

New Principal Place of Business:

2 PONDS EDGE DRIVE
CHADDS FORD, PA 19317

Current Mailing Address:

2 PONDS EDGE DRIVE
PO BOX 1478
CHADDS FORD, PA 19317

New Mailing Address:

FEI Number: 20-2710183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PRES
Name: MOORE, BRUCE E
Address: 2 PONDS EDGE DRIVE
City-St-Zip: CHADDS FORD, PA 19317

Title: PRES
Name: LEWIS, RALPH E II
Address: 7 NORTH WATER STREET
City-St-Zip: LIBERTY, MO 64069

Title: PRES
Name: SIGHT, JAMES W
Address: 2100 BROOKWOOD ROAD
City-St-Zip: SHAWNEE MISSION, KS 66208

Title: SEC
Name: DOUGHERTY, JOHN F JR
Address: 2 PONDS EDGE DRIVE
City-St-Zip: CHADDS FORD, PA 19317

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: BRUCE E. MOORE

PRES

06/17/2010

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