

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033262

FILED
Apr 22, 2009
Secretary of State

Entity Name: MC2 LLC

Current Principal Place of Business:

5729 COVE CIRCLE
NAPLES, FL 34119 US

New Principal Place of Business:

Current Mailing Address:

5729 COVE CIRCLE
NAPLES, FL 34119 US

New Mailing Address:

FEI Number: 20-1646623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACCAMO, MARCELLO D
5729 COVE CIRCLE
NAPLES, FL 34119 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: CACCAMO, MARCELLO D
Address: 5729 COVE CIRCLE
City-St-Zip: NAPLES, FL 34119 US

Title: MGRM () Delete
Name: RUSSELL, TIMOTHY R
Address: 5729 COVE CIRCLE
City-St-Zip: NAPLES, FL 34119 US

Title: MGRM (X) Delete
Name: MCGREGOR, PAMELA S
Address: PO BOX 2403
City-St-Zip: BONITA SPRINGS, FL 34133 US

Title: MGRM (X) Delete
Name: MCGREGOR, WILLIAM S
Address: PO BOX 2403
City-St-Zip: BONITA SPRINGS, FL 34133 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:

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: MARCELLO CACCAMO

MGRM

04/22/2009

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