


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90030 044 ***138.75

DOCUMENT # L06000004679

1. Entity Name
NEW LIBERTY, LLC



Principal Place of Business
**702 CARTER ROAD
 WINTER GARDEN, FL 34787**

Mailing Address
**702 CARTER ROAD
 WINTER GARDEN, FL 34787**

60029448



2. Principal Place of Business - No P.O. Box #
89 E BAY ST

3. Mailing Address
P O Box 598

Suite, Apt. #, etc.

04222008 Chg-LLC CR2E083 (12/06)

City & State
WINTER GARDEN FL

City & State
OCLOEE FL

4. FEI Number
56-2552514

Applied For
 Not Applicable

Zip
34787

Country

Zip
34761-0598

Country

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**GRECO, JOSEPH C JR.
 702 CARTER ROAD
 WINTER GARDEN, FL 34787**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
89 E BAY ST

City **WINTER GARDEN** FL Zip Code **34787**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRECO, DEBELLES, CAMERO, CARSA, FLA., INC 702 CARTER ROAD WINTER GARDEN, FL 34787 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition PO Box 598 OCLOEE FL 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM R & K CONSTRUCTION GROUP, LLC 2221 LEE ROAD, SUITE 15 WINTER PARK, FL 32789 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1006 W 25th ST SANFORD FL 32771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GLM, LLC 6767 HOFFNER ROAD ORLANDO, FL 328223402 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Gerard Debelles 4/22/08 407-877-7344

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #