


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000103377
 1. Entity Name
 UNITED 553, LLC



Principal Place of Business Mailing Address
 499 NORTH COURTENAY PKWY 499 NORTH COURTENAY PKWY
 MERRITT ISLAND, FL 32953 MERRITT ISLAND, FL 32953

DO NOT WRITE IN THIS SPACE



04042008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SUNDIN, GLENN T
 335 SOUTH PLUMOSA STREET
 STE A
 MERRITT ISLAND, FL 32952

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

000000938839
 05/28/08-80004-018 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR J & B DEVELOPMENT, LLC 499 NORTH COURTENAY PKWY MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CRIM, ROBERT J 499 NORTH COURTENAY PKWY MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CAREY, JAMES S 499 NORTH COURTENAY PKWY MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MGMS DEVELOPMENT, LLC 748 EAST INTERNATIONAL SPEEDWAY DRIVE DELAND, FL 32724
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR POLLITT, SCOTT R 748 EAST INTERNATIONAL SPEEDWAY DRIVE DELAND, FL 32724
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: *[Signature]* 04/30/08 321-459-0057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #