

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000005248

1. Entity Name
MURRELL ROAD OFFICE COMPLEX, LLC



Principal Place of Business
394 EAST DRIVE
MELBOURNE, FL 32904

Mailing Address
394 EAST DRIVE
MELBOURNE, FL 32904

DO NOT WRITE IN THIS SPACE



04262004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
59-3595421

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUMPHRIES, J. GREGORY ESQ
300 SOUTH ORANGE AVENUE
SUITE 100
ORLANDO, FL 32801-3373

**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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
VENTURE MANAGEMENT GROUP, INC.
394 EAST DRIVE
MELBOURNE, FL 32904

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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04262004 No Chg-LLC
04-30-04-080115-014 08.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/26/04

Date

321-726-8543

Daytime Phone #