

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071558

**Entity Name:** MAM MANAGING, LLC

**Current Principal Place of Business:**

11293 142ND WAY NORTH  
LARGO, FL 33774

**Current Mailing Address:**

679 SCHOOL ROAD  
JACOBUS, PA 17407

**FEI Number:** 45-2572278

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RICHARD, CATON P  
9075 SEMINOLE BOULEVARD  
SEMINOLE, FL 33772 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name MEREDITH, MCEVOY  
Address 679 SCHOOL ROAD  
City-State-Zip: JACOBUS PA 17407

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MEREDITH MCEVOY

**MANAGING MEMBER**

**01/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date