## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L00000009640

Entity Name: MCS ASSETS, L.L.C.

FILED Jan 23, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

451 BAYFRONT PLACE 1941 ISLA DE PALMA CIRCLE

UNIT #5302 NAPLES, FL 34119 NAPLES, FL 34102

Current Mailing Address: New Mailing Address:

451 BAYFRONT PLACE 1941 ISLA DE PALMA CIRCLE

UNIT #5302 NAPLES, FL 34119 NAPLES, FL 34102

FEI Number: 59-3682869 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WHITE, JOHN P 5051 CASTELLO DRIVE, SUITE 206 PARRISH, WHITE, LAWHON & MOORE, P.A. NAPLES, FL 34103 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

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: SANDOR, MARILYN C DR.
Address: 451 BAYFRONT PLACE, UNIT 5302 Address: 1941 ISLA DE PALMA CIRCLE

City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34119

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SANDOR, LOUIS
 Name:

 Address:
 21072 NORTH HIGHWAY 59
 Address:

 City-St-Zip:
 BARRINGTON, IL 60010
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARILYN C SANDOR MGRM 01/23/2005