LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

L00000013863

DOCUMENT # L00000013863

1. Entity Name
MG REAL ESTATE, L.L.C.

FILED
02 APR 29 AM 8:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2. Principal Place of Business	3. Mailing Address
2100 Country Club Road	Same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sanford, Florida	City & State: Same
Zip: 32771 Country: USA	Zip: Same Country: Same

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4. FEI Number 286-44-3810 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: N. Dwayne Gray, Jr.

Street Address (P.O. Box Number is Not Acceptable): Greenspoon, Marder, et. al.
135 W. Central Blvd.

City: Orlando FL Zip Code: 32801

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

900005369939--4

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR
NAME	N. Dwayne Gray, Jr.
STREET ADDRESS	135 W. Central Blvd., Suite 1100
CITY-ST-ZIP	Orlando, Florida 32801
TITLE	MGR
NAME	John Schlater
STREET ADDRESS	615 Copeland Mill Road
CITY-ST-ZIP	Westerville, Ohio 43081
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

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CR2E083B (12/01)

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: _____ MANAGER 4/26/02 (407) 425-6559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

L00000013863

ACCOUNT NO. : 072100000032

REFERENCE : 553444 5011958

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 55.00

ORDER DATE : April 29, 2002

ORDER TIME : 11:22 AM

ORDER NO. : 553444-015

CUSTOMER NO: 5011958

CUSTOMER: Anne Winsor, Legal Assistant
Greenspoon Marder Hirschfeld
135 West Central Blvd Ste 1100
South Trust Bank Building
Orlando, FL 32801

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: MG REAL ESTATE, L.L.C.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

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CONTACT PERSON: Janna Wilson-EXT#1155

EXAMINER'S INITIALS: _____

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