


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000005052 1. Entity Name MPD, LLC	
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Principal Place of Business 12645 RACE TRACK ROAD TAMPA, FL 33626	Mailing Address PO BOX 1175 OLDSMAR, FL 34677
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02012005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3711806	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

WHEELER, KATHY
12645 RACE TRACK RD
TAMPA, FL 33626

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEARS, RANDY 12645 RACE TRACK ROAD TAMPA, FL 33626
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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:  4-19-05 813-854-4486

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #