

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014316

Entity Name: MB5 REAL ESTATE, LLC

FILED  
Jan 05, 2011  
Secretary of State

**Current Principal Place of Business:**

11920 METRO PARKWAY  
FT. MYERS, FL 33912

**New Principal Place of Business:**

40528 US 19 N.  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

11920 METRO PARKWAY  
FT. MYERS, FL 33912

**New Mailing Address:**

40528 US 19 N.  
TARPON SPRINGS, FL 34689

FEI Number: 59-3739676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MATTER, THOMAS M  
11920 METRO PARKWAY  
FT. MYERS, FL 33912 US

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

MATTER, THOMAS M  
40528 US 19 N  
TARPON SPRINGS, FL 34689 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: THOMAS M MATTER

01/05/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MATTER, THOMAS M  
Address: 11920 METRO PARKWAY  
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM  
Name: MATTER, JOHN  
Address: 11920 METRO PARKWAY  
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM  
Name: MATTER, STEWART II  
Address: 11920 METRO PARKWAY  
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM  
Name: MATTER, GARY  
Address: 11920 METRO PARKWAY  
City-St-Zip: FT. MYERS, FL 33912

Title: MGRM  
Name: MATTER, DAVID  
Address: 11920 METRO PARKWAY  
City-St-Zip: FT. MYERS, FL 33912

I hereby 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: THOMAS M MATTER

MGRM

01/05/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date