

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 07, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L01000014803

1. Entity Name  
M & D LLC



Principal Place of Business  
43 COUNTRY CLUB ROAD  
NORTH KEY LARGO, FL 33037 US

Mailing Address  
43 COUNTRY CLUB ROAD  
NORTH KEY LARGO, FL 33037 US



03012005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1134440

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

HILLENBRAND, DANIEL A  
43 COUNTRY CLUB ROAD  
NORTH KEY LARGO, FL 33037

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

U000000255055  
03/07/05-80099-011 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	HILLEBRAND, MARY H
STREET ADDRESS	43 COUNTRY CLUB ROAD
CITY-ST-ZIP	NORTH KEY LARGO, FL 33037
TITLE	VP
NAME	HILLENBRAND, DANIEL A
STREET ADDRESS	43 COUNTRY CLUB ROAD
CITY-ST-ZIP	NORTH KEY LARGO, FL 33037
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-3-05 305/367-4293

Date

Daytime Phone #