

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2007 8:00 am
Secretary of State

02-01-2007 90048 028 ****50.00

DOCUMENT # L01000018157

1. Entity Name
MARCINSTEELIS, LLC



60010823



Principal Place of Business
**3073 WOODSONG LANE
CLEARWATER, FL 33761**

Mailing Address
**3073 WOODSONG LANE
CLEARWATER, FL 33761**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

01192007 Chg-LLC CR2E083 (12/06)

4. FEI Number
59-3756359

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
~~FORD, HELEN~~
~~390 NORTH ORANGE AVENUE, SUITE 1400~~
~~ORLANDO, FL 32801~~

7. Name and Address of New Registered Agent
Name
B&C Corporate Services of Central Florida, Inc.
Street Address (P.O. Box Number is Not Acceptable)
390 N. Orange Avenue, Suite 1400
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Anthony M. Palma, Vice President** DATE **1/19/07**

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HEPP, MARK J 3073 WOODSONG LANE CLEARWATER, FL 33761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: **1/23/07 727-727-5579**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #