

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000014480

1. Entity Name
MP & WC, LLC



Principal Place of Business

**3975 BERLIN DRIVE
SARASOTA, FL 34233**

Mailing Address

**3975 BERLIN DRIVE
SARASOTA, FL 34233**



01192006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
90-0121036

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LPS CORPORATE SERVICES, INC.
46 N. WASHINGTON BLVD., #1
SARASOTA, FL 34236**

**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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	MP INVESTMENTS INC.
STREET ADDRESS	9415 TOWN CENTER PKWY
CITY- ST- ZIP	BRADENTON, FL 34202
TITLE	MGR
NAME	WEST COAST REAL ESTATE MGMT GRP, INC
STREET ADDRESS	3975 BERLIN DR
CITY- ST- ZIP	SARASOTA, FL 34233
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 139, 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: *M. DeMott*

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

2/17/06

Date

Daytime Phone #