

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Jan 11, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # L02000032569**

1. Entity Name  
**#2 MULLINS, LLC**



Principal Place of Business  
**9112 FLAMINGO CIRCLE  
NORTH FORT MYERS, FL 33903**

Mailing Address  
**9112 FLAMINGO CIRCLE  
NORTH FORT MYERS, FL 33903**



01082007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1000760**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**STRAUSS, JEROME M  
5621 STRAND BLVD #100  
NAPLES, FL 34110**

**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, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
MULLINS, LLOYD  
9112 FLAMINGO CIRCLE  
NORTH FORT MYERS, FL 33903**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
MULLINS, NORMA  
9112 FLAMINGO CIRCLE  
NORTH FORT MYERS, FL 33903**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Lloyd Mullins* LLOYD MULLINS 4/8/07 2399976649**

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

Date

Daytime Phone #

U00000582753  
01/11/07-80042-020 50.00

**DO NOT WRITE  
IN THIS SPACE**