


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000033306 1. Entity Name MISSION BROOK, LLC																													
Principal Place of Business 1429 HIGHLAND DRIVE TALLAHASSEE, FL 32317			Mailing Address P.O. BOX 12563 TALLAHASSEE, FL 32317																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State Zip Country			City & State Zip Country																										
4. FEI Number 75-3109193			Applied For <input type="checkbox"/> Not Applicable																										
5. Certificate of Status Desired <input type="checkbox"/>			\$5.00 Additional Fee Required																										
6. Name and Address of Current Registered Agent DICKINSON, BRENDA D 1429 HIGHLAND DRIVE TALLAHASSEE, FL 32317			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																										
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 <i>Brenda D Dickinson</i> DATE 3-28-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																													
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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: <i>Brenda D Dickinson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			Date 3-28-08 Daytime Phone # 850-264-2184																										

FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



03282008 Chg-LLC CR2E083 (12/06)

4. FEI Number
75-3109193

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

**DICKINSON, BRENDA D
1429 HIGHLAND DRIVE
TALLAHASSEE, FL 32317**

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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10. ADDITIONS/CHANGES

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03/31/08--01006--017 **138.75**

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