

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000053

Entity Name: MARK 55, L.L.C.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

321 SPANISH GOLD LANE
NORTH CAPTIVA ISLAND, FL

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 236
PINELAND, FL 33945

New Mailing Address:

FEI Number: 16-1656075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, JANE R
321 SPANISH GOLD LANE
NORTH CAPTIVA ISLAND, FL US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HENDERSON, JEFFREY R
Address: P.O. BOX 2331
City-St-Zip: PNELAND, FL 33945

Title: MGRM () Delete
Name: HENDERSON, JANE R
Address: P.O. BOX 2331
City-St-Zip: PNELAND, FL 33945

Title: MGRM () Delete
Name: BURGESS, STEPHANIE
Address: 5312 PUNTA CALOOSA COURT
City-St-Zip: SANIBEL, FL 33957

Title: MGRM () Delete
Name: ALBORN, DENNIS
Address: 5620 THISTLEDOWN TERRACE
City-St-Zip: DAVIE, FL 33331

Title: MGRM () Delete
Name: YEAGER, BRETT
Address: 10741 NORTH BAYSHORE LANE
City-St-Zip: MILTON, WI 53563

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JANE R. HENDERSON

MGRM

03/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date