

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000001320

Entity Name: MAJELIS M, LLC

**FILED**  
**Mar 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

904 W WATERS AVE SUITE D  
TAMPA, FL 33604

**New Principal Place of Business:**

235 W BRANDON BLVD  
#259  
BRANDON, FL 33511 US

**Current Mailing Address:**

PO BOX 485  
SEFFNER, FL 33583

**New Mailing Address:**

FEI Number: 57-1148440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVIS, ROBERT W  
904 W WATERS AVE, SUITE D  
TAMPA, FL 33604 US

**Name and Address of New Registered Agent:**

DAVIS, ROBERT W  
235 W BRANDON BLVD  
#259  
BRANDON, FL 33511 US

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: ROBERT W DAVIS

03/08/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: D  
Name: MAJELIS LLC  
Address: PO BOX 485  
City-St-Zip: SEFFNER, FL 33583

Title: MGRM  
Name: DAVIS, M E  
Address: P.O. BOX 6885  
City-St-Zip: SEFFNER, FL 33583

I hereby 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: M E DAVIS

MGRM

03/08/2010

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