

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000008249

Entity Name: MATTHEW RESIDENTIAL, LLC

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7777 N. WICKHAM ROAD 12-317  
MELBOURNE, FL 32940

**New Principal Place of Business:**

521 WHISPERING PINES CIRCLE  
MELBOURNE, FL 32940

**Current Mailing Address:**

7777 N. WICKHAM ROAD 12-317  
MELBOURNE, FL 32940

**New Mailing Address:**

521 WHISPERING PINES CIRCLE  
MELBOURNE, FL 32940

FEI Number: 87-0688634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAFFORD, RONALD E  
267 ERIN LANE  
ROCKLEDGE, FL 32955 US

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

STAFFORD, RONALD E  
521 WHISPERING PINES CIRCLE  
MELBOURNE, FL 32940 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: RONALD E STAFFORD

01/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EULER, ERNEST C  
Address: 1143 BALMORAL DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM  
Name: RENFRO, ROBERT M  
Address: 642 DORAL LANE  
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM  
Name: STAFFORD, RONALD E  
Address: 521 WHISPERING PINES CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

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: RONALD E STAFFORD

MGRM

01/20/2012

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