## 2008 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Mar 14, 2008 08:00 AN Secretary of State DOCUMENT # L03000013871 1. Entity Name MMR, LLC Principal Place of Business Mailing Address 855 E, BRANDON BLVD 855 E. BRANDON BLVD BRANDON, FL 33511 BRANDON, FL. 33511 01222008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAYMOND, J. PAUL DO NOT WRITE 625 COURT STREET, STE. 200 CLEARWATER, FL 33756 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 FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS TITLE MGRM LAMONTE, NANCY C TRUSTEE NAME 2118 OAK HILL DRIVE STREET ADDRESS CITY-ST-ZIP VALRICO, FL 335944613 TITLE NAME STREET ADDRESS U00000857990 04/01/08-80027-009 138.75 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling 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 of the receiver or trustee efficiency of the receiver or trustee efficiency.

**SIGNATURE** 

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP