

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024452

FILED
Apr 23, 2004
Secretary of State

Entity Name: MLS PARTNERS, LLC

Current Principal Place of Business:

1265 SOUTH SEMORAN BLVD., SUITE 1243
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

1265 SOUTH SEMORAN BLVD., SUITE 1243
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 54-2117283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVENUE, SUITE 1100
ORLANDO, FL 32801 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/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: LOFGREN, PETER P
Address: 1265 S SEMORAN BLVD. SUITE 1243
City-St-Zip: WINTER PARK, FL 32792

Title: MGR () Change (X) Addition
Name: MITCHELL, JAMES VP
Address: 1265 S. SEMORAN BLVD. SUITE 1243
City-St-Zip: WINTER PARK, FL 32792

Title: MGR () Change (X) Addition
Name: SIEG, CHRISTIAN VP
Address: 1265 S. SEMORAN BLVD. SUITE 1243
City-St-Zip: WINTER PARK, FL 32792

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PETER LOFGREN

P

04/23/2004

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