

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024452

Entity Name: MLS PARTNERS, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

200 S CENTRAL AVE
OVIEDO, FL 32765 US

New Principal Place of Business:

200 S CENTRAL AVE
SUITE 2000
OVIEDO, FL 32765 US

Current Mailing Address:

23 ALAFAYA WOODS BLVD
#196
OVIEDO, FL 32765 US

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/MANAGERS:

Title: MGR () Delete
Name: LOFGREN, PETER P
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

Title: MGR () Delete
Name: MITCHELL, JAMES VP
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

Title: MGR () Delete
Name: SIEG, CHRISTIAN VP
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

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:

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: PETER LOFGREN

MGR

04/30/2009

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