

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000025285

**FILED**  
**May 18, 2006**  
**Secretary of State**

**Entity Name:** MAXMILLION REAL ESTATE LLC

**Current Principal Place of Business:**

P.O. BOX 100012  
CAPE CORAL, FL 33910 US

**New Principal Place of Business:**

11443 WATER FORD VILLAGE DRIVE  
FORT MYERS, FL 33913 US

**Current Mailing Address:**

P.O. BOX 100012  
CAPE CORAL, FL 33910 US

**New Mailing Address:**

11443 WATER FORD VILLAGE DRIVE  
FORT MYERS, FL 33913 US

**FEI Number:** 20-2327449      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MCLAUGHLIN, PAUL J  
4221 SE 2ND AVENUE  
CAPE CORAL, FL 33904 US

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

MCLAUGHLIN, PAUL J  
11443 WATER FORD VILLAGE DRIVE  
FORT MYERS, FL 33913 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: PAUL J MCLAUGHLIN

05/18/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCLAUGHLIN, PAUL J  
Address: 4221 SE 2ND AVENUE  
City-St-Zip: CAPE CORAL, FL 33904 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL J MCLAUGHLIN

MGRN

05/18/2006

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