

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038041

Entity Name: MMM GOOD, L.L.C.

FILED  
Mar 19, 2006  
Secretary of State

**Current Principal Place of Business:**

16770 S. U.S. HWY 441  
BAYLEE PLAZA - UNIT 608  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

**New Mailing Address:**

16770 S. U.S. HWY 441  
BAYLEE PLAZA - UNIT 608  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

6035 SPINNAKER LOOP  
LADY LAKE, FL 32159

FEI Number: 52-2404305

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LUISI, DEANNA M  
6035 SPINNAKER LOOP  
LADY LAKE, FL 32159 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: LUISI, RALPH C  
Address: 6035 SPINNAKER LOOP  
City-St-Zip: LADY LAKE, FL 32159

Title: MGR ( ) Delete  
Name: LUISI, DEANNA M  
Address: 6035 SPINNAKER LOOP  
City-St-Zip: LADY LAKE, FL 32159

**ADDITIONS/CHANGES:**

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 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: DEANNA LUISI

MGR

03/19/2006

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