

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004411

Entity Name: MAGICAL MOUNTAIN LLC

FILED  
Jan 18, 2010  
Secretary of State

**Current Principal Place of Business:**

310 EAST CORAL TRACE CIRCLE  
DELRAY BEACH, FL 33445 US

**New Principal Place of Business:**

**Current Mailing Address:**

310 EAST CORAL TRACE CIRCLE  
DELRAY BEACH, FL 33445 US

**New Mailing Address:**

FEI Number: 90-0135646

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSE, NATHAN M  
310 EAST CORAL TRACE CIRCLE  
DELRAY BEACH, FL 33445 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: MGRM  
Name: ROSE, NATHAN M  
Address: 310 EAST CORAL TRACE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: MGRM  
Name: ROSE, LINDA C  
Address: 310 EAST CORAL TRACE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: TR  
Name: ROSE, LINDA C  
Address: 310 EAST CORAL TRACE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: SEC  
Name: ROSE, LINDA C  
Address: 310 EAST CORAL TRACE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: P  
Name: ROSE, NATHAN M  
Address: 310 EAST CORAL TRACE CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby 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: NATHAN M ROSE

MGRM

01/18/2010

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