

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT.**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037915 1. Entity Name MFI, LLC	
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Principal Place of Business 2614 AMHERST LANE LAKE WORTH, FL 33460-6306	Mailing Address 2614 AMHERST LANE LAKE WORTH, FL 33460-6306
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03222006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1245845	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent FEARRINGTON, WILLA A ESQ ARNSTEIN & LEHR LLP 515 NORTH FLAGLER DRIVE, SIXTH FLOOR WEST PALM BEACH, FL 33401

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when reinstating)	DATE _____	

**Filing Fee is \$50.00
Due by May 1, 2006**

U00000500192
04/25/06-80013-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MM MACKLER, ROBERT W 2614 AMHERST LN LAKE WORTH, FL 334606306
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 609, Florida Statutes.		
SIGNATURE: <u></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date <u>4-5-06</u> Date	<u>(561) 3135365</u> Daytime Phone #