

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000039842	
1. Entity Name MURVIN PROPERTIES, LLC	

Principal Place of Business 2230 N.W. 10 STREET OCALA, FL 34475	Mailing Address 2230 N.W. 10 STREET OCALA, FL 34475
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DO NOT WRITE IN THIS SPACE



01192006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 25-7040235	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fees Required
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6. Name and Address of Current Registered Agent

MURVIN, CARMEN G 2230 N.W. 10 STREET OCALA, FL 34475

**DO NOT WRITE
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 this if applicable (NOTE: Registered Agent signature required when reappointing) DATE _____

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

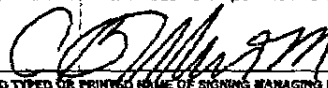
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MURVIN, CARMEN G 2230 N.W. 10 STREET OCALA, FL 34475
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date _____ Daytime Phone # _____