


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 15, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000042705</b> 1. Entity Name <b>MOTIVATED MANAGEMENT, LLC</b>	
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Principal Place of Business <b>1102 MAIN STREET LADY LAKE, FL 32159 US</b>	Mailing Address <b>5086 SE 44 CIRCLE OCALA, FL 34480 US</b>
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02222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>34-1998376</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>AVERBECK, SANDRA S 5086 SE 44 CIRCLE OCALA, FL 34480</b>
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**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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AVERBECK, SANDRA S 5086 SE 44 CIRCLE OCALA, FL 34480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AVERBECK, RONALD L JR 5086 SE 44 CIRCLE OCALA, FL 34480
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03/26/07-80037-022 50.00

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 608, Florida Statutes.

**SIGNATURE:** Sandra Averbek, SANDRA AVERBECK 3/13/07 352-753-4660  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #