

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000053825

Entity Name: M2 MAITLAND, LLC

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

217 N. WESTMONTE DRIVE  
#1007  
ALTAMONTE SPRINGS, FL 32714

## **New Principal Place of Business:**

217 N. WESTMONTE DRIVE  
#1007  
ALTAMONTE SPRINGS, FL 32714 CA

## **Current Mailing Address:**

217 N. WESTMONTE DRIVE  
#1007  
ALTAMONTE SPRINGS, FL 32714

## **New Mailing Address:**

FEI Number: 20-1385851      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CONNOR, MICHAEL T  
217 N. WESTMONTE DR.  
#1007  
ALTAMONTE SPRINGS, FL 32714 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: CONNOR, MICHAEL T  
Address: 51 OAKLEIGH LANE  
City-St-Zip: MAITLAND, FL 32751

Title: MGRM  
Name: CONNOR, MARGARET M  
Address: 51 OAKLEIGH LANE  
City-St-Zip: MAITLAND, FL 32751

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: MARGARET M. CONNOR      MGRM      03/20/2012

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