

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054143

Entity Name: 526 MELROSE, LLC

FILED  
Sep 05, 2007  
Secretary of State

**Current Principal Place of Business:**

824 E. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1246  
GAINESVILLE, FL 32602

**New Mailing Address:**

P.O. BOX 2632  
GAINESVILLE, FL 32602

FEI Number: 27-0106250      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

JENNINGS, MARY  
824 E. UNIVERSITY AVENUE  
GAINESVILLE, FL 32601      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      ( ) Delete  
Name: KRUGMAN-KADI, ALIZA  
Address: 824 E. UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

Title: MGRM      ( ) Delete  
Name: KRUGMAN-KADI, EILON  
Address: 824 E. UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 32601

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: MCEACHERN, WILLIAM E  
Address: 901 N.W. 8TH AVENUE, C3-0  
City-St-Zip: GAINESVILLE, FL 32601

Title: MGRM      (X) Change      ( ) Addition  
Name: MELLMAN, RICHARD  
Address: 901 N.W. 8TH AVENUE, C3-0  
City-St-Zip: GAINESVILLE, FL 32601

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: W.E. MCEACHERN

MGRM

09/05/2007

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