

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057279

Entity Name: MOONEY COLVIN, P.L.

FILED  
Mar 09, 2007  
Secretary of State

**Current Principal Place of Business:**

20 NORTH ORANGE AVE  
1307  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2569  
ORLANDO, FL 32802

**New Mailing Address:**

FEI Number: 20-1442368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOONEY, THOMAS E  
20 NORTH ORANGE AVE  
1307  
ORLANDO, FL 32801 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: MOONEY, THOMAS E MGRM  
Address: 20 NORTH ORANGE AVE, SUITE 1307  
City-St-Zip: ORLANDO, FL 32801

Title: MGRM ( ) Delete  
Name: COLVIN, JOHN V MGRM  
Address: 20 NORTH ORANGE AVE, SUITE 1307  
City-St-Zip: ORLANDO,, FL 32801

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS E. MOONEY

MGRM

03/09/2007

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