

# 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000074265

**FILED**  
**Apr 07, 2008**  
**Secretary of State**

**Entity Name:** FMM 1, LLC

**Current Principal Place of Business:**

2389 KING TERRACE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

**Current Mailing Address:**

2389 KING TERRACE  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 20-1746875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

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

MAUCK, MICHAEL G MGRM  
2389 KING TERRACE  
WELLINGTON, FL 33414 US

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: MICHAEL G. MAUCK, MGRM

04/07/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MAUCK REAL ESTATE HO, LDINGS, INC.  
Address: 2389 KING TERRACE  
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM ( ) Delete  
Name: PAPPER, FRANK L  
Address: 4667 ISLAND REEF DRIVE  
City-St-Zip: WELLINGTON, FL 33467

Title: MGRM ( ) Delete  
Name: HARLAND, MARTIN  
Address: 14303 DRAFT HORSE LANE  
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES:**

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

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 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: MICHAEL G. MAUCK

MGRM

04/07/2008

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