## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078491

Entity Name: MEL BEACH LLC

FILED May 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

522 N LAKESIDE DR 23 NW 17TH ST

LAKE WORTH, FL 33460 DELRAY BEACH, FL 33444

**Current Mailing Address: New Mailing Address:** 

522 N LAKESIDE DR 23 NW 17TH ST

LAKE WORTH, FL 33460 DELRAY BEACH, FL 33444

FEI Number: 20-1823302 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: Name and Address of New Registered Agent:

RING, ERIK RING, ERIK

23 NW 17TH ST 522 N LAKESIDE DR

LAKE WORTH, FL 33460 DELRAY BEACH, FL 33444 US 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: 05/01/2008

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGR MGR () Delete (X) Change ( ) Addition

RING, ERIK M RING, ERIK M Name: Name: Address: 522 N LAKESIDE DR Address: 23 NW 17TH ST

City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: DELRAY BEACH, FL 33444

Title: MGRM Title: MGRM (X) Change ( ) Addition ( ) Delete

Name: RING, SUSAN Name: RING, SUSAN Address: 522 N LAKESIDE DR Address: 23 NW 17TH ST

City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: DELRAY BEACH, FL 33444

Title: MGRM () Delete Title: () Change () Addition

ALLOCCO, MARC T Name: Name: 103 NE 12TH STREET Address: Address: City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip:

Title: MGRM ( ) Delete Title: () Change () Addition

Name: ALLOCCO, CHERAN Name: Address: 103 NE 12TH STREET Address: City-St-Zip: DELRAY BEACH, FL 33444 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: ERIK M RING 05/01/2008