

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90033 049 ****50.00

DOCUMENT # L04000080045

1. Entity Name

MAPLEWOOD 2 C, LLC



Principal Place of Business

1931 COMMERCE LANE, SUITE 2 C
JUPITER FL 33458

Mailing Address

10670 SE JUPITER NARROWS DR
HOBE SOUND FL 33455



2. Principal Place of Business

1931 COMMERCE LANE

Suite, Apt. #, etc.

SUITE 4

City & State

JUPITER

Zip

FL

Country

33458

3. Mailing Address

1931 COMMERCE LANE

Suite, Apt. #, etc.

SUITE 4

City & State

JUPITER

Zip

FL

Country

33458

1st MOORE

CR2E083 (10/05)

4. FEI Number

59-3793408

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MANGONE, MARIO
10670 SE JUPITER NARROWS DR
HOBE SOUND FL 33455

7. Name and Address of New Registered Agent

Name

MANGONE, MARIO

Street Address (P.O. Box Number is Not Acceptable)

1931 COMMERCE LANE

SUITE 4

City

JUPITER

FL

Zip Code

33458

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title (multiplicity)

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State

Due By May 1, 2006

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	MANGONE, MARIO	
STREET ADDRESS	10670 SE JUPITER NARROWS DR	
CITY - ST - ZIP	HOBE SOUND FL 33455	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	MANGONE, DEBRA	
STREET ADDRESS	10670 SE JUPITER NARROWS DR	
CITY - ST - ZIP	HOBE SOUND FL 33455	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	NORTHSEA PRIOR, DEBRA	
STREET ADDRESS	6008 EAGLES NEST DRIVE	
CITY - ST - ZIP	JUPITER FL 33455	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

10. ADDITIONS / CHANGES

TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANGONE, MARIO	
STREET ADDRESS	1931 COMMERCE LANE, SUITE 4	
CITY - ST - ZIP	JUPITER, FL 33458	
TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANGONE, DEBRA	
STREET ADDRESS	1931 COMMERCE LANE, SUITE 4	
CITY - ST - ZIP	JUPITER, FL 33458	
TITLE	MGR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NORTHSEA PRIOR, DEBRA	
STREET ADDRESS	1931 COMMERCE LANE, SUITE 4	
CITY - ST - ZIP	JUPITER, FL 33458	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date:

Daytime Phone #