

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000082492 1. Entity Name 623 MUREX, L.L.C.	
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Principal Place of Business 2100 TRADE CENTER WAY, SUITE D NAPLES, FL 34109	Mailing Address 2100 TRADE CENTER WAY, SUITE D NAPLES, FL 34109
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03132006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 26-0099381	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SKRIVAN, KENT A ESQ. LAW OFFICES OF KENT A. SKRIVEN, PLLC 801 LAUREL OAK DRIVE, SUITE 705 NAPLES, FL 34108
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Sign as no. words or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when re-registering) (27 ft)

**Filing Fee is \$50.00
Due by May 1, 2006**

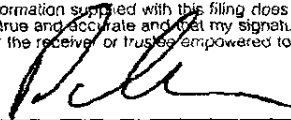
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04/29/06-80236-025 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY ST ZIP	MGR CORNERSTONE VENTURES 1, INC. 2100 TRADE CENTER WAY, SUITE D NAPLES, FL 34109
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:



3/14/06

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

Date

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