

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

May 22, 2008 8:00 am
Secretary of State

04-11-2008 90177 032 ***138.75

DOCUMENT # L04000087813

1. Entity Name
M & L JOINT VENTURE, LLC



Principal Place of Business

**255 THE ESPLANADE
#303
VENICE, FL 34285**

Mailing Address

**255 THE ESPLANADE
#303
VENICE, FL 34285**

DO NOT WRITE IN THIS SPACE

02042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-1984687

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LAMB, FRED J
255 THE ESPLANADE
#303
VENICE, FL 34285**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when releasing)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
LAMB, FRED J
255 THE ESPLANADE #303
VENICE, FL 34285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
LAMB, CHARLOTTE A
255 THE ESPLANADE #303
VENICE, FL 34285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MATHEWS, JOHN E
4247 WORDSWORTH WAY
VENICE, FL 34293**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
MATHEWS, BRENDA K
4247 WORDSWORTH WAY
VENICE, FL 34293**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:

Fred J. Lamb, Managing Partner

May 15, 2008

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

Date

Daytime Phone #