

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005709

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: MMRB INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

13517 E. 90TH STREET NORTH  
OWASSO, OK 74055

**New Principal Place of Business:**

**Current Mailing Address:**

13517 E. 90TH STREET NORTH  
OWASSO, OK 74055

**New Mailing Address:**

FEI Number: 20-2353147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALSOP, C. ROYCE  
889 SWAN DRIVE  
MARCO ISLAND, FL 34145 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCORSONE, MARC A  
Address: 13517 E. 90TH STREET NORTH  
City-St-Zip: OWASSO, OK 74055

Title: MGRM ( ) Delete  
Name: SCORSONE, MICHELLE L  
Address: 13517 E. 90TH STREET NORTH  
City-St-Zip: OWASSO, OK 74055

Title: MGRM ( ) Delete  
Name: ALSOP, C. ROYCE  
Address: 889 SWAN DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete  
Name: ALSOP, BARBARA G  
Address: 889 SWAN DRIVE  
City-St-Zip: MARCO ISLAND, FL 34145

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHELLE L. SCORSONE

MGRM

04/23/2007

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