

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90348 049 ****50.00

DOCUMENT # L05000011189					
1. Entity Name MBM PROPERTY GROUP LLC					
Principal Place of Business 10126 S.W. 52ND ROAD GAINESVILLE, FL 32608			Mailing Address 10126 S.W. 52ND ROAD GAINESVILLE, FL 32608		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		04042007 Chg-LLC CR2E083 (12/06)	
Zip	Country	Zip	Country	4. FEI Number NOT APPLICABLE	
5. Certificate of Status Desired ☐				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BASS, BROOKE M 10126 S.W. 52ND ROAD GAINESVILLE, FL 32608			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
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 <i>Brooke M Bass</i>				DATE <i>4/5/07</i>	
(NOTE: Registered Agent signature required when rechartering)					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MILLS, MARY D 1560 OCEAN LANE, UNIT 205 FORT LAUDERDALE, FL 33316		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>MGRM</i> <i>MILLS, MARY D</i> <i>4 Pipemaker La.</i> <i>Savannah, GA 31411</i>	
	☐ Delete			☒ Change ☐ Addition	
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: <i>Brooke M Bass</i>				DATE: <i>4/5/07</i> <i>352-246-4664</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					