


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000018016

1. Entity Name
MARIE MCGREGOR, LLC



| | |
|--|--|
| Principal Place of Business 16050 DORA AVENUE TAVARES, FL 32778 US | Mailing Address 16050 DORA AVENUE TAVARES, FL 32778 US |
|--|--|



01132007 No Chg-LLC CR2E083 (11/05)

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| | |
|--|---------------------------------------|
| 4. FEI Number 20-2375383 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

MCGREGOR, MARIE G
 16050 DORA AVENUE
 TAVARES, FL 32778

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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 _____ (NOTE: Registered Agent signature required when retaining) _____ DATE _____

Filing Fee is \$50.00
Due by May 1, 2007

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MCGREGOR, MARIE G 16050 DORA AVENUE TAVARES, FL 32778 |
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 01/22/07-80055-004-55.00

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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: *Marie G. McGregor* 1/16/2007 352-357-3100