

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000019813

Entity Name: MEN IN BLACK, LLC

FILED  
Aug 20, 2007  
Secretary of State

## Current Principal Place of Business:

3200 VILLAGE WALK CT  
SUITE 202  
NAPLES, FL 34109

## New Principal Place of Business:

13625 LESINA CT  
ESTERO, FL 33928

## Current Mailing Address:

3200 VILLAGE WALK CT  
SUITE 202  
NAPLES, FL 34109

## New Mailing Address:

13625 LESINA CT  
ESTERO, FL 33928

FEI Number: 04-3802098      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

RICE, ROGER B P.A.  
5425 PARK CENTRAL COURT  
NAPLES, FL 34109      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: NELSON, STEVEN SCOTT  
Address: 3200 VILLAGE WALK CIRCLE, E202  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES:

Title: MGRM      (X) Change      ( ) Addition  
Name: NELSON, STEVEN SCOTT  
Address: 13625 LESINA CT  
City-St-Zip: ESTERO, FL 33928

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN SCOTT NELSON

MGRM

08/20/2007

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