

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022553

Entity Name: MATTAPAN SQUARE DEVELOPMENT, LLC

FILED  
Jan 17, 2006  
Secretary of State

**Current Principal Place of Business:**

11 N SUMMERLIN AVE., SUITE 100  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

11 N SUMMERLIN AVE., SUITE 100  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number:  FEI Number Applied For ( )  FEI Number Not Applicable (X)  Certificate of Status Desired ( )

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

MILLER, BARRY L  
11 N. SUMMERLIN AVE  
ORLANDO, FL 32801 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: INVESTOR HOLDINGS, L, LC  
Address: 11 N SUMMERLIN AVENUE, SUITE 100  
City-St-Zip: ORLANDO, FL 32801

Title: MGRM  Delete  
Name: MILO PROPERTIES, LLC,  
Address: 6703 MOTT AVENUE  
City-St-Zip: ORLANDO, FL 32810

Title: MGRM  Delete  
Name: STIRLING, CHASE & L, EVINE, LLC  
Address: 6005 STIRLING ROAD, SUITE 110  
City-St-Zip: DAVIE, FL 33314

**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:

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: BARRY L. MILLER

BM

01/17/2006

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