

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031310

FILED
Jul 24, 2007
Secretary of State

Entity Name: MESH, LLC

Current Principal Place of Business:

P.O. BOX 6143
LIVE OAK, FL 32064

New Principal Place of Business:

123 EAST HOWARD STREET
C/O ANITA HANDY
LIVE OAK, FL 32064

Current Mailing Address:

P.O. BOX 6143
LIVE OAK, FL 32064

New Mailing Address:

123 EAST HOWARD STREET
C/O ANITA HANDY
LIVE OAK, FL 32064

FEI Number: 51-0543853 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

HANDY, ANITA K
530 WESTMORELAND STREET
LIVE OAK, FL 32064 US

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: EDWARDS, DONALD E
Address: 13544 76TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: MGRM () Delete
Name: MARABLE, WILLIAM M JR.
Address: POST OFFICE BOX 1506
City-St-Zip: LIVE OAK, FL 32064

Title: MGRM () Delete
Name: HANDY, ANITA K
Address: 530 WESTMORELAND STREET
City-St-Zip: LIVE OAK, FL 32064

Title: MGRM () Delete
Name: SHIRAH, KELLIE F
Address: 12437 CR 137
City-St-Zip: WELLBORN, FL 32094

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 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: ANITA K HANDY

MGRM

07/24/2007

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