

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031310

Entity Name: MESH, LLC

FILED
Apr 16, 2008
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

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

Current Mailing Address:

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

New Mailing Address:

127 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 ()

Name and Address of Current Registered Agent:

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

04/16/2008

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