


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000035588</b> 1. Entity Name CMBC ACQUISITIONS, L.L.C.	
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Principal Place of Business 97 GREY DAPPLE WAY ORMOND BEACH, FL 32174	Mailing Address 97 GREY DAPPLE WAY ORMOND BEACH, FL 32174
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**DO NOT WRITE IN THIS SPACE**



04112008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 51-0543602	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  KELLY CASE, WILLIAM 97 GREY DAPPLE WAY ORMOND BEACH, FL 32174
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**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASE, WILLIAM K 97 GREY DAPPLE WY ORMOND BEACH, FL 32174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COONEY, STEVEN 485 OAKLAND PK BLVD PORT ORANGE, FL 32127
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05/13/08-80032-024 138.75

**DO NOT WRITE  
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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:  William Kelly Case 4/21/08 386-5660 3572  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #