

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # L05000036153

1. Entity Name  
MARTIN STREET APARTMENTS MIDDLE, LLC



Principal Place of Business

C/O J.C. MOYLE, JR.//ATTN: JCM MGT  
118 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301

Mailing Address

C/O J.C. MOYLE, JR.//ATTN: JCM MGT  
118 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301



01182007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-2672130

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

MOYLE, JON C JR.  
118 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301

**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 reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME JCM MANAGEMENT, LLC  
STREET ADDRESS 118 NORTH GADSDEN STREET  
CITY-ST-ZIP TALLAHASSEE, FL 32301

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

U00000699182  
04/19/07-80032-013 50.00

**DO NOT WRITE  
IN THIS SPACE**

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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-10-07

Date

(850) 681-3828

Daytime Phone #