2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 23, 2006 8:00 am **DOCUMENT # L05000037017** Secretary of State 1. Entity Name 03-23-2006 90258 037 ****55.00 M G & M PARTNERS, LLC Principal Place of Business Mailing Address 604 65TH STREET COURT NORTHWEST 604 65TH STREET COURT NORTHWEST BRADENTON, FL 34209 BRADENTON, FL 34209 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #, etc. 01092006 Chg-LLC CR2E083 (11/05) Applied For 4. FEI Number City & State City & State 35-22 Not Applicable \$5.00 Additional Zip Country Zip Country 5. Certificate of Status Desired M Fee Required 7. Name and Address of New Registered Agent " 6. Name and Address of Current Registered Agent 7.5 HARRISON, G. JOSEPH Street Address (P.O. Box Number is Not Acceptable) 1206 MANATEE AVENUE WEST BRADENTON, FL 34205 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 Rorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to Filing Fee is \$50.00 Florida Department of State Due by May 1, 2006 9. MANAGING MEMBERS/MANAGERS 10 ADDITIONS/CHANGES TITLE ■ Addition MGR ☐ Change TITLE • Delete NAME MULLINS, MICHELLE H NAME 604 65TH STREET COURT NORTHWEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34209 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TTLE NAME STREET ADDRESS STREET ADDRESS CTTY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TILE TIBE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ■ Addition TIME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP □ Delete TITLE ☐ Change ■ Addition -NAME NAME STREET ADDRESS STREET ADDRESS 20 - 20 July 1 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE πne ☐ Delete NAME NAME

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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.

STREET ADORESS CITY-ST-7IP

Michelle & Mullins

STREET ADDRESS

CITY-ST-ZIP