2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 02, 2006 8:00 am
Secretary of State
04-06-2006 90300 043 ****50.00

DOCUMENT # L05000040144

1. Entity Name
MMP EQUITY, LLC

Principal Place of Business
2300 GLADES ROAD, SUITE 100E
BOCA RATON, FL 33431

Mailing Address
2300 GLADES ROAD, SUITE 100E
BOCA RATON, FL 33431

01162006 Chq-LLC CR2E083 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt #, etc	Suite, Apt # etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number
47-0953317

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GREENFIELD, WILLIAM R
2300 GLADES ROAD, SUITE 100E
BOCA RATON, FL 33431

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ... the obligations of registered agent

SIGNATURE

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	MGRM Greenfield, William R 2300 Glades Rd, Ste 100E ~~Boca Raton, FL 33431~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes ... 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 R. Greenfield 3/23/06 561-392-6662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/6/2006-90300-043-$50.00-$50.00

ATTACHMENT

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000040144

1. Entity Name
MMP EQUITY, LLC

30009469

[redacted]

Principal Place of Business	Mailing Address
2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431	2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431

01162006 Chg-LLC CR2E083 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 47-0953317 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GREENFIELD, WILLIAM R 2300 GLADES ROAD, SUITE 100E BOCA RATON, FL 33431	Name Street Address (P O Box Number is Not Acceptable) City FL Zip Code

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 _____ Date

Filing Fee is $50.00
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Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date