2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000047822

HOLLY HILL, FL 32117

Entity Name: M & M AND R DEVELOPMENT, LLC

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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ATLANTIS INDUSTRIAL PARK, LOT 3 ATLANTIS INDUSTRIAL PARK, LOT 3

BUNNELL, FL 32110 2525 NORTH STATE STREET

BUNNELL, FL 32110

Current Mailing Address: New Mailing Address:

1515 RIDGEWOOD AVE 2550 NORTH STATE STREET

SUITE #7

BUNNELL, FL 32110 US

FEI Number: 20-2880400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOREA, NANCY MOREA, NANCY

18 CORTES COURT 2550 NORTH STATE STREET

PALM COAST, FL 32137 US SUITE #7
BUNNELL, FL 32110 US

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: NANCY MOREA 03/24/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOREA, NANCY
 Name:

 Address:
 18 CORTES COURT
 Address:

 City-St-Zip:
 PALM COAST, FL 32137
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MOREA, MICHAEL
 Name:

 Address:
 18 CORTES COURT
 Address:

 City-St-Zip:
 PALM COAST, FL 32137
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 MOREA, JOSEPHINE
 Name:
 MOREA, JOSEPHINE

 Address:
 1895 BAY BOULEVARD
 Address:
 16 CHERRY TREE COURT

 City-St-Zip:
 ATLANTIC BEACH, NY 11509
 City-St-Zip:
 PALM COAST, FL 32137

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RAYMOND, GARY
 Name:

 Address:
 5 CHEVIL WAY
 Address:

 City-St-Zip:
 PALM COAST, FL 32137
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RAYMOND, ANGELA
 Name:

 Address:
 5 CHEVIL WAY
 Address:

 City-St-Zip:
 PALM COAST, FL 32137
 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: NANCY MOREA MNGR 03/24/2009