

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000051437

Entity Name: M & D ENTERPRISES, LLC

FILED
Jul 19, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 1925
VERO BEACH, FL 32960

New Principal Place of Business:

P.O. BOX 1925
VERO BEACH, FL 32961

Current Mailing Address:

P.O. BOX 1925
VERO BEACH, FL 32960

New Mailing Address:

P.O. BOX 1925
VERO BEACH, FL 32961

FEI Number: 32-0157136 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HUMPHREY-IRVIN, RACQUEL
8505 S US HIGHWAY 1
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: AUSBY, DONNIE JR
Address: P.O. BOX 1925
City-St-Zip: VERO BEACH, FL 32960

Title: MGR () Delete
Name: ROLLE, MAURICE
Address: P.O. BOX 1925
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: AUSBY, DONNIE JR
Address: P.O. BOX 1925
City-St-Zip: VERO BEACH, FL 32961

Title: MGR (X) Change () Addition
Name: ROLLE, MAURICE
Address: P.O. BOX 1925
City-St-Zip: VERO BEACH, FL 32961

I hereby certify that the information supplied with this filing does not qualify for the 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: MAURICE ROLLE

MGR

07/19/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date