


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000057476 1. Entity Name MA & PA'S ENTERPRISES/LLC	
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Principal Place of Business 3241 NE HIGHWAY 349 OLDTOWN, FL 32680 US	Mailing Address 3241 NE HIGHWAY 349 OLDTOWN, FL 32680 US
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01212007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1726498	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BENSON, VICTOR P SR 3241 NE HWY 349 OLDTOWN, FL 32680

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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 NAME STREET ADDRESS CITY-ST-ZIP	MGR BENSON, VICTOR P SR 3241 NE HWY 349 OLDTOWN, FL 32680
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BENSON, DOROTHY J 3241 NE HWY 349 OLDTOWN, FL 32680
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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.

SIGNATURE: Dorothy J. Benson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR APPROVING

1-22-NL 253-444-1720