

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090517

Entity Name: MERF HOLDINGS, LLC

FILED  
Jul 08, 2008  
Secretary of State

**Current Principal Place of Business:**

15203 LAKE MAURINE DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

15203 LAKE MAURINE DRIVE  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 20-4240693      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:**

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

FALKNER, JAMES W  
15203 LAKE MAURINE DRIVE  
ODESSA, FL 33556      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FALKNER, JAMES W  
Address: 15203 LAKE MAURINE DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: MGRM ( ) Delete  
Name: RANDOLPH, ROBERT E  
Address: 608 CRYSTAL GROVE BLVD.  
City-St-Zip: LUTZ, FL 33548

Title: MGRM (X) Delete  
Name: EVANS, JOE G  
Address: 16927 MELLISSA ANN DRIVE  
City-St-Zip: LUTZ, FL 33558

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FALKNER, JAMES W  
Address: 15203 LAKE MAURINE DRIVE  
City-St-Zip: ODESSA, FL 33556 US

Title: MGRM (X) Change ( ) Addition  
Name: FALKNER, JANICE F  
Address: 15203 LAKE MAURINE DR.  
City-St-Zip: ODESSA, FL 33556 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES W. FALKNER

MGR

07/08/2008

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