2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000095279

1. Entity Name MYTEN MANAGEMENT, LLC



FILED Apr 23, 2007 08:00 All Secretary of State

Principal Place of Business

1601 BELVEDERE ROAD

407 SOUTH

WEST PALM BEACH, FL 33406

Mailing Address

1601 BELVEDERE ROAD

407 SOUTH

WEST PALM BEACH, FL 33406



01052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3541255

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MEYER, WILLIAM A 1601 BELVEDERE ROAD

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WEST PALM BEACH, FL 33406		IN THIS SPACE	
	e named entity submits this statement for the purpose of cha tions of registered agent.	lunging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	DATE
F D	lling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	,	•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MEYER, WILLIAM A 1601 BELVEDERE ROAD 407 S WEST PALM BEACH, FL 33406		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000724928 05/03/07-80002-017 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE
TITLE	l	I INI	TUIC CDACE

IN THIS SPACE

11. I hereby certify that the information supplied with this filing tices 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 employered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

William A. Meyer 1/15/07