

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096591

FILED
Jan 12, 2006
Secretary of State

Entity Name: ACMMME PROPERTIES, LLC

Current Principal Place of Business:

11279 BEEBALM CR
BRADENTON, FL 34202 US

New Principal Place of Business:

Current Mailing Address:

11279 BEEBALM CR
BRADENTON, FL 34202 US

New Mailing Address:

FEI Number: 20-3562391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, SCOTT F
4890 WEST KENNEDY BLVD
240
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

SAWA, SCOTT
4890 WEST KENNEDY BLVD
240
TAMPA, FL 33609 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: SCOTT SAWA

01/12/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DONATO, CHRISTOPHER M
Address: 11279 BEEBALM CR
City-St-Zip: BRADENTON, FL 34202 US

Title: MGR () Delete
Name: DONATO, AMY
Address: 11279 BEEBALM CR
City-St-Zip: BRADENTON, FL 34202 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: DONATO, BARTHOLOMEW
Address: 11279 BEEBALM CR
City-St-Zip: BRADENTON, FL 34202 US

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: CHRISTOPHER M DONATO

MGR

01/12/2006

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