## **2007 LIMITED LIABILITY COMPANY**

## Apr 19, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L05000100559 04-19-2007 90026 012 \*\*\*\*50.00 MUNICIPAL TECHNOLOGIES, LLC Principal Place of Business Mailing Address 7282 163RD COURT N 7282 163RD COURT N PALM BEACH GARDENS, FL 33418 US PALM BEACH GARDENS, FL 33418 US 04162007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 51-0559204 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MURRAY, STEVEN DO NOT WRITE 7282 163RD COURT N PALM BEACH GARDENS, FL 33418 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, 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 MANAGING MEMBERS/MANAGERS 9, MGR TITLE MURRAY, STEVEN NAME STREET ADDRESS 7282 163RD COURT N CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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:

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED**