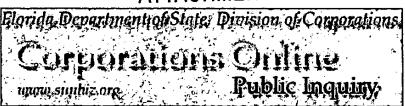
# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

# FILED Jun 09, 2006 8:00 am Secretary of State 05-02-2006 90035 050 \*\*\*\*50.00

1. Entity Nam	MENT #L050001 PERTIES, LLC	21389				03-02-200	0 90033 030	30.00	
Principal Place of Business 1675 INDEPENDENCE BLVD. SARASOTA, FL 34234			Mailing Address 1675 INDEPENDENCE BLVD. SARASOTA, FL 34234			30009994			
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt, #, etc.	Suite, Apt, #, etc.		04272006	Chg-LLC	CR2E083 (11/05	<b>)</b>	
City & State		City & State	City & State		4. FEI Num	per	<del></del>	Applied For Not Applicable	
Zip	Country	Zip	Coun	itry	5. Certificat	e of Status Desired	S5.00 A		
	6. Name and Address of Cur	rent Registered Agent		Name : :	7. Name an	d Address of New Re	gistered Agent		
GREENW	LL, RICHARD	معمده مدن روز ربيدوست							
	D. OF THE PRESIDENTS A, FL 34236			Street Addre	ess (P.O. Box Num	ber is Not Acceptable)	<del></del>		
				City			FL Zip Co	ode	
	named entity submits this statem	ent for the purpose of changing it	s register	ed office or reg	istered agent, or b	oth, in the State of Flori	ida. I am familiar wit	h, and accept	
_	ions of registered agent.								
SIGNATURE .	Signature, typed or printed name of registered	agent and tipe if applicable (NO	TÉ Augsteis	kt Agenti signeture re	dried med (energy)		DATE		
Fi D	iling Fee is \$50.00 ue by May 1, 2006						check payable to Department of Str		
9.	,	EMBERS/MANAGERS	10.			ADDITIONS/C	CHANGES		
TITLE NAME	MGR GREENWELL, RICHARD	☐ Delete	TITL NAM	- i			☐ Change	Addition	
STREET ADDRESS CITY+ST-ZIP	19 N. BLVD. OF THE PRES. SARASOTA, FL 34236	IDENTS	STR	EET ADDRESS					
BILE		☐ Defe to	Title				Change	Addition	
NAME STREET ADDRESS				EET ADORESS 14	an K. Gan 1822 Belle	zza Lane			
CITY-ST-ZiP			CITY		_	rida 34110.	Change		
TITLE NAME		Daleta	NAM			anahawa Tr		<b>∑</b> Addation	
STREET ADDRESS CHTY-S1-ZIP				-ST-ZIP 14	1822 Belle			İ	
IIILE		☐ Delete	TITL	. Na	ples, Flo	<del>rida 34110</del>	☐ Change	Addition	
NAME CTOSET ADDRESS			NAM STOR					}	
STREET ADDRESS CITY-ST-ZIP			_	EET ADDRESS - ST-ZIP					
NTLE		☐ Deleta	tif1				☐ Change	Addition	
STREET ACCIDESS	ļ		STRI	AL EET ADORESS		•			
CITY-ST-ZIP		<del></del>		'-SI-ZIP					
RTLE NAME		Celete	SITE MAN				Change	- Addition	
SIREET ADDRESS CHY-SI-ZIP			SIR	EET ADDRESS '- ST-ZIP					
indicated	certify that the information supplied on this report is true and accurate ability company or the Jeconomy or	e and that my signature shall have	e the sam	e legal effect a	s if made under oa	th: that I am a managir	ther certify that the in ng member or manag	formation ger of the	
	X ( )	M1		•		28-20 <b>0</b> 6	(222)00	2-51	
SIGNATURE: 1 2006 (350) 463-5 400 Deginner and typed on Printed Name of Scotling Managing Machiner, Naturalized Representative Day Deginner Prome #							2 2 TW		



Florida Limited Liability

**MVS PROPERTIES, LLC** 

PRINCIPAL ADDRESS 1675 INDEPENDENCE BLVD. SARASOTA FL 34234

MAILING ADDRESS 1675 INDEPENDENCE BLVD. SARASOTA FL 34234

Document Number L05000121389

State FL

**Total Contribution** 0.00

FEI Number NONE

Status ACTIVE **Date Filed** 12/21/2005

Effective Date NONE

## Registered Agent

### Name & Address

GREENWELL, RICHARD 19 N. BLVD. OF THE PRESIDENTS SARASOTA FL 34236

Manager/Member Detail

Name & Address	Title
GREENWELL, RICHARD 19 N. BLVD. OF THE PRESIDENTS SARASOTA FL 34236	MGR
SARASOTA FL 34236	

**Annual Reports** 

Report Year	Filed Date

**Division of Corporations** 

Previous Filing



Page 2 of 2

No Events No Name History Information

Document Images
Listed below are the images available for this filing.

12/21/2005 -- Florida Limited Liability

THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT

Corporations Inquiry



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2006

MVS PROPERTIES, LLC 1675 INDEPENDENCE BLVD. SARASOTA, FL 34234

Subject: MVS PROPERTIES, LLC

Reference Number:

£05000121389

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/jr ANNUAL REPORTS SECTION