

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000002554

FILED  
Sep 24, 2009  
Secretary of State

Entity Name: CM GLOBAL SYSTEMS LLC

**Current Principal Place of Business:**

2755 COZUMEL DR.  
1207  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

130 KINGSTOWN COLONY DR.  
MARYVILLE, TN 37803

**New Mailing Address:**

FEI Number: 03-0575670      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:**

JIM, DORL  
5701 OVERSEAS HIGHWAY  
12  
MARATHORN, FL 33050 US

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

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: MGR ( ) Delete  
Name: MAPP, DOUGLAS O  
Address: 130 KINGSTOWN COLONY DR.  
City-St-Zip: MARYVILLE, TN 37803

Title: MGRM ( ) Delete  
Name: MAPP, DOUGLAS O II  
Address: 130 KINGSTOWN COLONY DR  
City-St-Zip: MARYVILLE, TN 37803

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: MGRM ( ) Change (X) Addition  
Name: MAPP, CLAUDE D  
Address: 2700 FM 802 APT# 1115  
City-St-Zip: BROWNSVILLE, TX 78526

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: DOUGLAS MAPP

MGR

09/24/2009

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