


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000003198 1. Entity Name MP ONE, LLC	
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Principal Place of Business 26212 MADRAS CT PUNTA GORDA, FL 33983	Mailing Address 26212 MADRAS CT PUNTA GORDA, FL 33983
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04242008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4983176	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SEIDER, WILLIAM M 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236
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**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when restate) DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$838.75**

U000000936968
05/27/08-80031-008 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PVD PALMER, PHILIP 26212 MADRAS CT PUNTA GORDA, FL 33983
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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

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

Philip Palmer 4/25/08 941-766-8315

Date

Daytime Phone #