

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011815

FILED
Jan 23, 2008
Secretary of State

Entity Name: M & S ENTERPRISES OF ORLANDO, LLC

Current Principal Place of Business:

1725 EAST HIGHWAY 50, SUITE B
CLERMONT, FL 34711

New Principal Place of Business:

37 N. ORANGE AVE
SUITE 500
ORLANDO, FL 32801

Current Mailing Address:

1725 EAST HIGHWAY 50, SUITE B
CLERMONT, FL 34711

New Mailing Address:

37 N. ORANGE AVE
SUITE 500
ORLANDO, FL 32801

FEI Number: 55-0795950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GLOVER, SHELLEY C
6113 BLAKEFORD DRIVE
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

GLOVER, MARK D
6113 BLAKEFORD DRIVE
WINDERMERE, FL 34786 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: MARK D. GLOVER

01/23/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GLOVER, MARK D
Address: 1725 EAST HIGHWAY 50, SUITE B
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: GLOVER, SHELLY C
Address: 1725 EAST HIGHWAY 50, SUITE B
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GLOVER, MARK D
Address: 37 N. ORANAGE AVE
City-St-Zip: ORLANDO, FL 32801

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

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: MARK D. GLOVER

MGRM

01/23/2008

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