

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017359

FILED
Apr 29, 2008
Secretary of State

Entity Name: MUTUAL AGREEMENT, L.L.C.

Current Principal Place of Business:

329 MIRACLE STRIP PARKWAY
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

329 MIRACLE STRIP PARKWAY
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 26-2317993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, WILLIAM S
909 MAR WALT DRIVE
1014
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

KALCH, DAVIDA A
329 MIRACLE STRIP PARKWAY SW
FORT WALTON BEACH, FL 32548 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: DAVIDA A KALCH

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HUTSON, DONALD W
Address: 329 MIRACLE STRIP PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM () Delete
Name: HUTSON, KAREN T
Address: 329 MIRACLE STRIP PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES:

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

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: DONALD W HUTSON

MGRM

04/29/2008

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