

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023199

FILED
May 04, 2007
Secretary of State

Entity Name: MBRH PROPERTIES, LLC

Current Principal Place of Business:

5116 SOUTH LAKE LAND DRIVE
LAKE LAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 6455
LAKE LAND, FL 33807

New Mailing Address:

FEI Number: 20-4374975 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:

Name and Address of New Registered Agent:

HARBSMEIER, CURT L
5116 SOUTH LAKE LAND DRIVE
LAKE LAND, FL 33813 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MORSE, EMERY T
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: MGRM () Delete
Name: MORSE, JULIANNE
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: MGRM () Delete
Name: BREDEWEG, BERNARD
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: MGRM () Delete
Name: BREDEWEG, MARY
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: MGRM () Delete
Name: RIDDLE, AUSTIN
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: MGRM () Delete
Name: RIDDLE, KAREN
Address: 5116 SOUTH LAKE LAND DRIVE
City-St-Zip: LAKE LAND, FL 33813

ADDITIONS/CHANGES:

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

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

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

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

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: EMERY T. MORSE

MGRM

05/04/2007

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