

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000025493

FILED
Aug 13, 2009
Secretary of State

Entity Name: ME - FIRST, LLC

Current Principal Place of Business:

660 LINTON BLVD.
SUITE 207 A
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

660 LINTON BLVD.
SUITE 207 A
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 43-2100012 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:

PERRY, MARK A
50 S.E. FOURTH AVENUE
DELRAY BEACH, FL 33483 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: KUTT, SABINE
Address: 660 LINTON BLVD., SUITE 207 A
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: SUESS, FRANK
Address: 660 LINTON BLVD., SUITE 207 A
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: SUESS, OLIVER
Address: 660 LINTON BLVD., SUITE 207 A
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGR () Delete
Name: THUSS, STEVE
Address: 660 LINTON BLVD., SUITE 207 A
City-St-Zip: DELRAY BEACH, FL 33444

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
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: SABINE KUTT

MGR

08/13/2009

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