


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 29, 2007 8:00 am
Secretary of State

03-29-2007 90181 029 ****50.00

DOCUMENT # L06000029577

1. Entity Name
MARS, LLC



Principal Place of Business Mailing Address

1776 RINGLING BLVD 1776 RINGLING BLVD
 SARASOTA FL 34236 SARASOTA FL 34236



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

2201 CANTU CT. **2201 CANTU CT.**

Suite, Apt. #, etc. Suite, Apt. #, etc.

SUITE 116 **SUITE 116**

City & State City & State

SARASOTA, FL. **SARASOTA, FL.**

Zip Country Zip Country

34232 **SARASOTA** **34232** **SARASOTA**

1st MOORE CR2E083 (10/06)

4. FEI Number Applied For

20-4540668 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KIRTLEY, WILLIAM T
1776 RINGLING BLVD
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name **R. ROBERT MOXLEY**

Street Address (P.O. Box Number is Not Acceptable)
2201 CANTU CT.

SUITE 116

City **SARASOTA** FL Zip Code
34232

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: **R. ROBERT MOXLEY - CHAIRMAN** DATE: **3/19/07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input checked="" type="checkbox"/> Delete
NAME	JOSEPHSON, TODD	
STREET ADDRESS	1776 RINGLING BLVD	
CITY - ST - ZIP	SARASOTA FL 34236	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	R. ROBERT MOXLEY	
STREET ADDRESS	2201 CANTU CT. STE. 116	
CITY - ST - ZIP	SARASOTA, FL. 34232	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

10. ADDITIONS/CHANGES

TITLE	MGRM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	R. ROBERT MOXLEY	
STREET ADDRESS	2201 CANTU CT. STE. 116	
CITY - ST - ZIP	SARASOTA, FL. 34232	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **R. Robert Moxley - R. ROBERT MOXLEY** DATE: **3/19/07** Daytime Phone: **941-914-7114**

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