

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000055294

FILED
May 21, 2007
Secretary of State

Entity Name: MILLENIUM MANAGEMENT, LLC

Current Principal Place of Business:

7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 20-5189305 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:

FRAHM, LARAINÉ
7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 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: MGR () Delete
Name: FRAHM, LARAINÉ
Address: 7901 KINGSPONTE PARKWAY, SUITE 17
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR () Delete
Name: BROWN, VALERIE
Address: 7901 KINGSPONTE PARKWAY, SUITE 17
City-St-Zip: ORLANDO, FL 32819 US

Title: MGR () Delete
Name: CRUZ, NILDA
Address: 7901 KINGSPONTE PARKWAY, SUITE 17
City-St-Zip: ORLANDO, FL 32819 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: V.P () Change (X) Addition
Name: BONILLA, MICHELLE
Address: 7901 KINGSPONTE PARKWAY, SUITE 17
City-St-Zip: ORLANDO, FL 32819

Title: V.P () Change (X) Addition
Name: FRAHM, WESLEY
Address: 7901 KINGSPONTE PARKWAY, SUITE 17
City-St-Zip: ORLANDO, FL 32819

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: LARAINÉ FRAHM

MGR

05/21/2007

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