2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070387

Entity Name: 591MA, LLC

FILED Apr 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5150 BELFORT RD. S. 3617 MONTCLAIR DRIVE #500 JACKSONVILLE, FL 32217

JACKSONVILLE, FL 32256

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

5150 BELFORT RD. S. 3617 MONTCLAIR DRIVE #500 JACKSONVILLE, FL 32217

FEI Number: 20-5213944 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUDWIG & ASSOCIATES, P.A. 5150 BELFORT RD. S. #500 JACKSONVILLE, FL 32256 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: ADDITIONS/CHANGES:

Title: () Delete Title: MS () Change (X) Addition

 Name:
 Name:
 DEVINE, KATHLEEN S

 Address:
 Address:
 3617 MONTCLAIR DRIVE

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32217

I hereby certify that the information supplied with this filing does not qualify for the 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: KATHLEEN S. DEVINE MS 04/11/2007