

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 24, 2007 8:00 am
Secretary of State

03-27-2007 90201 041 ****50.00

DOCUMENT # L06000076656 1. Entity Name MATTC, LLC					
Principal Place of Business 3331 NW 28 PLACE GAINESVILLE, FL 32605			Mailing Address 3331 NW 28 PLACE GAINESVILLE, FL 32605		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
30005559 					
01242007 Chg-LLC CR2E083 (12/06) 4. FEI Number 383738945 Applied For ☐ Not Applicable ☒					
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required					
6. Name and Address of Current Registered Agent RAINWATER, CHRIS E 3331 NW 28 PLACE GAINESVILLE, FL 32605			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reappointing)					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAINWATER, MELINDA R 3331 NW 28 PLACE GAINESVILLE, FL 32605	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RAINWATER, CHRIS E 3331 NW 28 PLACE GAINESVILLE, FL 32605	☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			SIGNATURE: <u>M. Rainwater, M. Rainwater</u> Date: <u>3/19/07</u> Devere Phone #: <u>(352)376-6775</u>		

Corrected copy 4/13/07 (MRT)