

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080734

Entity Name: MARK A. BRANT, P.E., LLC

FILED  
Mar 27, 2007  
Secretary of State

**Current Principal Place of Business:**

1620 MEDICAL LANE, STE 118  
FORT MYERS, FL 33907

**New Principal Place of Business:**

1620 MEDICAL LANE, STE 118  
FORT MYERS, FL 33907 US

**Current Mailing Address:**

1620 MEDICAL LANE, STE 118  
FORT MYERS, FL 33907

**New Mailing Address:**

1620 MEDICAL LANE, STE 118  
FORT MYERS, FL 33907 US

FEI Number: 20-5380958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KYLE, KEVIN A  
1380 ROYAL PALM SQUARE BOULEVARD  
FORT MYERS, FL 33907 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: BRANT, MARK A  
Address: 1620 MEDICAL LANE, STE 118  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BRANT, MARK A  
Address: 1620 MEDICAL LANE, STE 118  
City-St-Zip: FORT MYERS, FL 33907 US

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: MARK A. BRANT

MGR

03/27/2007

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