2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000090188

1. Entity Name

MERCURY PAW MANAGEMENT, LLC



FILED Jan 28, 2008 08:00 AN Secretary of State

Principal Place of Business

8737 WHITE IBIS CT ORLANDO, FL 32836 Mailing Address

PO BOX 2077 WINDERMERE, FL 32836



01252008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5540655

Applied For Not Applicab

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JENKINS, JOHN A 8737 WHITE IBIS CT ORLANDO, FL 32836

NAME STREET ADDRESS CITY-ST-ZIP

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registere	d office or registered agent, or both, in the S	State of Florida. I am familiar with, and accep	
SIGNATURE.				227	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating) DATE			
	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		U0900 02/05/08	0304412 8-80067-016 138.75 ————————————————————————————————————	
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JENKINS, JOHN A 8737 WHITE IBIS CT ORLANDO, FL 32836				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		:	DO NO	DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			*****	58.	

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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

LAV: SOGN A SERVING (15508 321-299-2906