

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113524

FILED
Jul 03, 2007
Secretary of State

Entity Name: MBM REALTY INVESTMENT LLC

Current Principal Place of Business:

819 NE 15 AVENUE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

819 NE 15 AVENUE
OCALA, FL 34470

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

MARK, MCQUAIG
819 NE 15 AVENUE
OCALA, FL 34470 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: MGRM () Delete
Name: MCQUAIG, MARK
Address: 819 NE 15 AVENUE
City-St-Zip: Ocala, FL 34470

Title: MGRM () Delete
Name: JARRELL, BRENDA
Address: 508 SE WENONA AVENUE
City-St-Zip: Ocala, FL 34471

Title: MGRM () Delete
Name: WILBURN, SARAH A
Address: 2403 SE 15TH STREET
City-St-Zip: Ocala, FL 34471

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:

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: MARK MCQUAIG

MGRM

07/03/2007

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