## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000048871

Entity Name: MUSA MGA, LLC

FILED Apr 20, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1528 LAKEVIEW ROAD 7785 66TH STREET CLEARWATER, FL 33756 US PINELLAS PARK, FL 33781 US **Current Mailing Address: New Mailing Address:** PO BOX 5400 7785 66TH STREET PINELLAS PARK, FL 33781 LARGO, FL 33779 US US FEI Number: 26-0159466 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: BLACKLIDGE, RAYMOND M ESQUIRE BLACKLIDGE, RAYMOND M ESQUIRE 28810 FALLING LEAVES WAY 7785 66TH STREET WESLEY CHAPEL, FL 33543 PINELLAS PARK, FL 33781 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: RAYMOND M BLACKLIDGE 04/20/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JERGER, THOMAS J Name: Name: 5900 98TH AVENUE NORTH Address: Address: City-St-Zip: PINELLAS PARK, FL 33782 US City-St-Zip: Title: Title: MGR (X) Change ( ) Addition ( ) Delete BLACKLIDGE, RAYMOND M Name: BLACKLIDGE, RAYMOND M Name: Address: 28810 FALLING LEAVES WAY Address: 7785 66TH STREET City-St-Zip: WESLEY CHAPEL, FL 33543 US City-St-Zip: PINELLAS PARK, FL 33781 US Title: () Delete Title: ( ) Change (X) Addition RYAN, GAVIN Name: Name: 100 NORTHWOODS DRIVE Address: Address: City-St-Zip: City-St-Zip: NEW BRAUNFELS, TX 78132 Title: () Delete Title: ( ) Change (X) Addition Name: Name: BRAUN, STEPHEN 150 N WACKER DRIVE SUITE 2800 Address: Address: City-St-Zip: City-St-Zip: CHICAGO, IL 60606 Title: () Delete Title: ( ) Change (X) Addition YANCHUCK, JOEL Name: Name: 9924 GULF BLVD Address: Address: City-St-Zip: City-St-Zip: TREASURE ISLAND, FL 33706 Title: () Delete Title: ( ) Change (X) Addition JERGER, JOHN T Name: Name: Address: Address: 1961 COVE LANE CLEARWATER, FL 33764 City-St-Zip: 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: RAYMOND M BLACKLIDGE MGR 04/20/2009