

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000089482

**FILED**  
**Apr 04, 2008**  
**Secretary of State**

**Entity Name:** MELCOR PROPERTY RESOURCES, LLC

**Current Principal Place of Business:**

810 SILK OAK TER.  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 521881  
LONGWOOD, FL 32752

**New Mailing Address:**

**FEI Number:** 26-1361933

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEAGLE, JOSEPH E P. A.  
501 E. SOUTH STREET  
SUITE B  
ORLANDO, FL 32801 US

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

SEAGLE, JOSEPH E P. A.  
924 WEST COLONIAL DRIVE  
ORLANDO, FL 32804 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:

04/04/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LANGMAN, MICHAEL E  
Address: P.O. BOX 521881  
City-St-Zip: LONGWOOD, FL 32752

**ADDITIONS/CHANGES:**

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: MICHAEL E. LANGMAN

MGRM

04/04/2008

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