2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093018

118 HEATHERBROOKE CIRCLE

OVIEDO, FL 32765 US

Address:

City-St-Zip:

Entity Name: MTD7, LLC

FILED Aug 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 223 HEATHERBROOKE CIRCLE 244 HEATHERBROOKE CIRCLE OVIEDO, FL 32765 OVIEDO, FL 32765 **Current Mailing Address: New Mailing Address:** 223 HEATHERBROOKE CIRCLE OVIEDO, FL 32765 FEI Number: 26-0884034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent: KELLIS, PAUL 223 HEATHERBROOKE CIRCLE OVIEDO, FL 32765 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BOYD, EDWARD Name: Name: Address: 244 HEATHERBROOKE CIRCLE Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: MGRM Title: () Delete () Change () Addition Name: KELLIS, PAUL Name: Address: 223 HEATHERBROOKE CIRCLE Address: City-St-Zip: OVIEDO, FL 32765 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition PROCTOR, GREGORY S Name: Name: Address: 14845 ROYAL POINCIANA DR Address: City-St-Zip: ORLANDO, FL 32828 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BOYD, MICHAEL Name:

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.

Address:

City-St-Zip:

SIGNATURE: PAUL W. KELLIS MGRM 08/29/2008