2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L08000047097

Entity Name: MMG RE HOLDINGS, LLC

Current Principal Place of Business:

411 BATH CLUB BLVD. SOUTH
NORTH REDINGTON BEACH, FL 33708

New Principal Place of Business:

411 BATH CLUB BLVD. SOUTH
NORTH REDINGTON BEACH, FL 33708 US

Current Mailing Address:

411 BATH CLUB BLVD. SOUTH
NORTH REDINGTON BEACH, FL 33708

New Mailing Address:

411 BATH CLUB BLVD. SOUTH
NORTH REDINGTON BEACH, FL 33708 US

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

Name and Address of Current Registered Agent:

RIVELLINI, PETER A
911 CHESTNUT STREET
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

RIVELLINI, PETER A ESQ
911 CHESTNUT STREET
CLEARWATER, FL 33756 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: PETER A. RIVELLINI 04/28/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: GRIMES, MICHAEL
Address: 411 BATH CLUB BLVD. SOUTH
City-St-Zip: NORTH REDINGTON BEACH, FL 33708 US

Title: MEMB ( ) Change (X) Addition
Name: GRIMES, MARILYN
Address: 411 BATH CLUB BLVD. SOUTH
City-St-Zip: NORTH REDINGTON BEACH, FL 33708 US

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 GRIMES MGRM 04/28/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date