

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000068300

Entity Name: MCS&N PROPERTIES, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

249 LIVE OAK LANE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

620 N. WYMORE RD.
#200
MAITLAND, FL 32751

Current Mailing Address:

249 LIVE OAK LANE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

620 N. WYMORE RD.
#200
MAITLAND, FL 32751

FEI Number: 26-2989780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REICH, JEFFREY W
249 LIVE OAK LANE
ALTAMONTE SPRINGS, FL 32714 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: REICH, JEFFREY W
Address: 249 LIVE OAK LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: BRAMLAGE, DONALD
Address: 4754 PENINSULA DRIVE
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: REICH, JEFFREY W
Address: 620 N. WYMORE RD., #200
City-St-Zip: MAITLAND, FL 32751

Title: MGRM (X) Change () Addition
Name: BRAMLAGE, DONALD
Address: 1326 S. RIDGEWOOD AVE., #15
City-St-Zip: DAYTONA BEACH, FL 32114

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: JEFFREY REICH

MGRM

04/29/2009

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