

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090798

FILED
Jan 19, 2009
Secretary of State

Entity Name: FMB MANGROVE NETWORK, LLC

Current Principal Place of Business:

1661 ESTERO BLVD., #3
FT. MYERS BEACH, FL 33931

New Principal Place of Business:

1661 ESTERO BLVD.
UNIT 1
FT. MYERS BEACH, FL 33931

Current Mailing Address:

1661 ESTERO BLVD., #3
FT. MYERS BEACH, FL 33931

New Mailing Address:

6150 DIAMOND CENTRE COURT
FORT MYERS, FL 33912

FEI Number: 26-3439586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NETWORK MANAGEMENT SERVICES, LLC
6151 DIAMOND CENTRE COURT, BLDG. 400
FT. MYERS, FL 33912 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: MGR () Delete
Name: NETWORK MANAGEMENT S, ERVICES, LLC
Address: 6151 DIAMOND CENTRE COURT, BLDG. 400
City-St-Zip: FT. MYERS BEACH, FL 33912

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

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLOY, RICHARD L
Address: 6151 DIAMOND CENTRE COURT, BLDG. 400
City-St-Zip: FT. MYERS BEACH, FL 33912

Title: MGRM () Change (X) Addition
Name: SCHOLLE, STEPHEN F
Address: 1661 ESTERO BLVD., UNIT 1
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: MGR () Change (X) Addition
Name: WOODARD, JOHN A
Address: 6150 DIAMOND CENTRE COURT, BLDG. # 400
City-St-Zip: FORT MYERS, FL 33912

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: JOHN WOODARD

TREA

01/19/2009

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