

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000109616

Entity Name: MK V OF NWFL, LLC

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6206 E HIGHWAY 22  
CALLAWAY, FL 32404

**New Principal Place of Business:**

2310 S HWY 77 STE 110  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

PO BOX 6516  
CALLAWAY, FL 32404

**New Mailing Address:**

2310 S HWY 77 STE 110  
LYNN HAVEN, FL 32444

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCMAHON, SHARON  
1206 W LAKEWALK CIR  
PANAMA CITY BEACH, FL 32413 US

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

BONNIN, MARY  
2310 S HWY 77 STE 110  
LYNN HAVEN, FL 32444 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: MARY BONNIN

05/01/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BONNIN, MARY  
Address: 7519 LITTLETON RD  
City-St-Zip: PANAMA CITY BEACH, FL 32404

Title: MGRM  
Name: MCMAHON, SHARON  
Address: 1206 W LAKEWALK CIR  
City-St-Zip: PANAMA CITY BEACH, FL 32413

I hereby 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: MARY BONNIN

MGRM

05/01/2011

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