

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000007827

Entity Name: MT WAVES 907, LLC

**FILED**  
**Feb 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

114 VISTA TER SOUTH  
MAHOPAC, NY 105413175

**New Principal Place of Business:**

**Current Mailing Address:**

114 VISTA TER SOUTH  
MAHOPAC, NY 105413175

**New Mailing Address:**

FEI Number: 27-4681263

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

UCC FILING & SEARCH SERVICES, INC.  
1574 VILLAGE SQUARE BLVD., SUITE 100  
TALLAHASSEE, FL 32309 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  
Name: ROBERTS, JONATHAN  
Address: 114 VISTA TER SOUTH  
City-St-Zip: MAHOPAC, NY 105413175

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: JONATHAN ROBERTS

MGRM

02/12/2012

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