

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000071295

Entity Name: 207 BURNERZ M.C. LLC

FILED
Apr 03, 2012
Secretary of State

Current Principal Place of Business:

415 N. MAIN STREET
HASTINGS, FL 32033

New Principal Place of Business:

5935 STATE ROAD 207
ELKTON, FL 32033

Current Mailing Address:

POST OFFICE BOX 252
INTERLACHEN, FL 32148

New Mailing Address:

5935 STATE ROAD 207
ELKTON, FL 32033

FEI Number: 45-2491984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMBERT, DARRIN
200 COLLEGE ROAD
APT. 46
PALATKA, FL 32177 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: PRES
Name: REMBERT, DARRIN
Address: POST OFFICE BOX 252
City-St-Zip: INTERLACHEN, FL 32148

Title: VP
Name: HAYWARD, ELIJAH
Address: 5935 SR 207
City-St-Zip: ELKTON, FL 32033

Title: TREA
Name: BAKER, OCTAVIOUS
Address: 940 SOUTH GARDEN LAKE DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: SEC
Name: HAYWARD, MIKAH
Address: 5935 SR 207
City-St-Zip: ELKTON, FL 32033

Title: TREA
Name: BAKER, DONALD
Address: 116 PEASANT ROAD
City-St-Zip: SATSUMA, FL 32189

Title: VP-2
Name: JACKSON, LEROY
Address: 217 DOGWOOD LANE
City-St-Zip: PALATKA, FL 32177

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: DARRIN REMBERT

PRES

04/03/2012

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