

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000246

FILED
Feb 27, 2009
Secretary of State

Entity Name: MSD FAMILY LIMITED COMPANY

Current Principal Place of Business:

1222 DONNA DRIVE
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

1222 DONNA DRIVE
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0653098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PULS, JAMES M
9211 GRAN PALM CT
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

PULS, JAMES M
9211 GRAN PALM CT
RIVERVIEW, FL 33578 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:

02/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PULS, HARRIET E. R
Address: 1222 DONNA DR.
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM () Delete
Name: PULS, JAMES M
Address: 9211 GRAND PALM COURT
City-St-Zip: RIVERVIEW, FL 33569

Title: MGRM () Delete
Name: PULS, ROBERT R
Address: 1222 DONNA DR.
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM () Delete
Name: PULS, JOHN L JR.
Address: 1222 DONNA DR.
City-St-Zip: FT. MYERS, FL 33919

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: PULS, JAMES M
Address: 9211 GRAND PALM COURT
City-St-Zip: RIVERVIEW, FL 33578

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROBERT R. PULS

MGRM

02/27/2009

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