

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # L98000003433**

1. Entity Name  
**MAN-TRANS, L.L.C.**



Principal Place of Business  
**4920 WOODLAND CIRCLE  
TALLAHASSEE, FL 32303**

Mailing Address  
**4920 WOODLANE CIRCLE  
TALLAHASSEE, FL 32303**

**DO NOT WRITE IN THIS SPACE** <sup>BK</sup>



04042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**59-3559550**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BRENNEIS, JOHN E  
227 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 32301-1805**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
MOORE, DARRELL B  
4920 WOODLAND CIRCLE  
TALLAHASSEE, FL 32303**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

<sup>BK</sup>

**800101629098**  
05/07/07--01003--010 \*\*50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**DARRELL MOORE**

Date

Signing Phone #

**4/30/07** **(888) 569-05**

*Dept. of State*

**FILED**

**07 APR 30 AM 8:54**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**