

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000406

FILED
Jan 13, 2009
Secretary of State

Entity Name: MNS FINANCIAL MANAGEMENT, L.L.C.

Current Principal Place of Business:

6216 WHISKEY CREEK DR
SUITE A
FORT MYERS, FL 33919

New Principal Place of Business:

Current Mailing Address:

6216 WHISKEY CREEK DR
SUITE A
FORT MYERS, FL 33919

New Mailing Address:

FEI Number: 65-0889300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRICHBAUM, RICHARD E
6216 WHISKEY CREEK DR STE A
FORT MYERS, FL 33919 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 () Delete
Name: KRICHBAUM, RICHARD E
Address: 6216 WHISKEY CREEK DR SUITE A
City-St-Zip: FORT MYERS, FL 33919

Title: MGR () Delete
Name: SANDS, KIM S
Address: 6216 WHISKEY CREEK DR SUITE A
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: SANDS, S. KIM
Address: 6216 WHISKEY CREEK DR SUITE A
City-St-Zip: FORT MYERS, FL 33919

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: RICHARD E. KRICHBAUM

MGR

01/13/2009

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