2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000001508

1. Entity Name

M-2 REAL ESTATE HOLDINGS, L.L.C.

May 01, 2006 08:00 Al Secretary of State

FILED

Principal Place of Business

ATTN; N. DWAYNE GRAY, JR., ESQUIRE 201 EAST PINE STREET, SUITE 500 ORLANDO, FL 32801 Mailing Address

ATTN; N. DWAYNE GRAY, JR., ESQUIRE 201 EAST PINE STREET, SUITE 500 ORLANDO, FL 32801



04252006 No Chg-LLC

CR2E083 (11/05)

f. FEI Number	Applied For
59-3566726	Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GRAY, N. DWAYNE JR. GREENSPOON, MARDER, ET AL 201 E PINE STREET STE 500 ORLANDO, FL 32801

the obligations of registered agent.

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SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable,	(NOTE, Registered Agent signature required when reinstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		** ** ** ** ** ** ** ** ** ** ** ** **
THTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GRAY, N. DWAYNE JR. 201 E PINE ST, STE 500 ORLANDO, FL 32801	A TO A TO A MEDICINE SERVICE	Section 2 and 1 and 2 an
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SCHLATER, JOHN 615 COPELAND MILL ROAD WESTERVILLE, OH 43081	の 単語 (新·克斯特·斯特·马克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克
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indicated	on this report is true and accurate and that my signature si	qualify for the exemptions contained in Chapter 119, Florida Statu hall have the same legal effect as if made under oath; that I am a cute this report as required by Chapter 608, Florida Statutes.	ites. I further certify that the information

N. D WAYNE GRAY JA

MANIAGER

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

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