

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001652

Entity Name: MERCURY REALTY, L.L.C.

FILED
Feb 23, 2009
Secretary of State

Current Principal Place of Business:

4843 VICTOR STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4843 VICTOR STREET
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 59-3554745

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERCURY LUGGAGE MANUFACTURING COMPANY
4843 VICTOR STREET
JACKSONVILLE, FL 32207 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: MERCURY LUGGAGE MANU, FACTURING COMP A NY
Address: 4843 VICTOR STREET
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR () Delete
Name: SCHILSON, RANDY
Address: 14750 BEACH BLVD. #60
City-St-Zip: JACKSONVILLE, FL 32250

Title: MGR () Delete
Name: LASKA, MICHAEL
Address: 659-C PONTE VEDRA BLVD.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: SCHILSON, RANDY
Address: 13839 WEEPING WILLOW WAY
City-St-Zip: JACKSONVILLE, FL 32224

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: RANDY SCHILSON

MGR

02/23/2009

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