

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90009 024 ****50.00

DOCUMENT # L99000004565

1. Entity Name
MPG ASSOCIATES, LLC



| | |
|--|--|
| Principal Place of Business 27300 RIVERVIEW CTR BLVD SUITE 201 BONITA SPRINGS FL 34134-4316 US | Mailing Address 27300 RIVERVIEW CTR BLVD SUITE 201 BONITA SPRINGS FL 34134-4316 US |
|--|--|



CHECK HERE IF MAKING CHANGES

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
| City & State | City & State |
| Zip Country | Zip Country |

| | |
|---------------------------------|-------------------------------|
| 4. FEI Number 59-3590180 | Applied For Not Applicable |
|---------------------------------|-------------------------------|

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

| | |
|--|---|
| 6. Name and Address of Current Registered Agent MPG ASSOCIATES - WM G PRICE, JR WILLIAM G. PRICE, JR. 27300 RIVERVIEW CTR BLVD #201 BONITA SPRINGS FL 34134 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
|--|---|

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

| 9. MANAGING MEMBERS / MANAGERS | | 10. ADDITIONS / CHANGES | |
|--|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MCGARVEY, JOHN S 27300 RIVERVIEW CTR BLVD #201 BONITA SPRINGS FL 34134-4316 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM GERNER, DANIEL F 27300 RIVERVIEW CTR BLVD #201 BONITA SPRINGS FL 34134-4316 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM PRICE, WILLIAM G JR 27300 RIVERVIEW CTR BLVD #201 BONITA SPRINGS FL 34134-4316 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MCGARVEY IRREVEACABLE TRUST 27300 RIVERVIEW CTR BLVD #201 BONITA SPRINGS FL 34134-4316 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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] **REQUIRE** 3-25-03 239-992-8940

CR2E083 (10/02)