

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001032

Entity Name: MGMT FIVE, LLC

**FILED**  
**Mar 21, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

342 OMNI DRIVE  
SPARKS, NV 894367256

**New Principal Place of Business:**

**Current Mailing Address:**

342 OMNI DRIVE  
SPARKS, NV 894367256

**New Mailing Address:**

FEI Number: 55-9845173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORNELIUS, CHERYL  
300 S. DUNCAN AVE., SUITE 275  
CLEARWATER, FL 33755 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: MGR ( ) Delete  
Name: ERIKA L BARRETT LIVI, NG TRUST  
Address: %JB MGMT INC, 300 S DUNCAN AVE STE 275  
City-St-Zip: CLEARWATER, FL 33755

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIKA L BARRETT

MGR

03/21/2007

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