



**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 08, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M03000000556</b> 1. Entity Name <b>MC MENAMY LLC</b>	
--	---

Principal Place of Business <b>7980 SUMMERLIN LAKES DR., STE. 201 FORT MYERS, FL 33907</b>	Mailing Address <b>7980 SUMMERLIN LAKES DR., STE. 201 FORT MYERS, FL 33907</b>
---	---

<b>DO NOT WRITE IN THIS SPACE</b>
-----------------------------------



01102007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>81-0596996</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>MC MENAMY, JAMES B 7980 SUMMERLIN LAKES DR., STE. 201 FORT MYERS, FL 33907</b>
--

<b>DO NOT WRITE IN THIS SPACE</b>
---------------------------------------

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$50.00 Due by May 1, 2007</b>
---

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	<b>MGR MC MENAMY, JAMES B 7980 SUMMERLIN LAKES DR., STE. 201 FORT MYERS, FL 33907</b>
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	

U000000627546  
02/15/07-80064-020 50.00

<b>DO NOT WRITE IN THIS SPACE</b>
---------------------------------------

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *James B McMenamy* 1/10/07 2394376300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #