

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000003304

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** MORGRAN MANAGEMENT LLC

**Current Principal Place of Business:**

203 LOOKOUT PLACE  
SUITE A  
MAITLAND, FL 32751

**New Principal Place of Business:**

450 N. WYMORE ROAD  
WINTER PARK, FL 32789

**Current Mailing Address:**

203 LOOKOUT PLACE  
SUITE A  
MAITLAND, FL 32751

**New Mailing Address:**

450 N. WYMORE ROAD  
WINTER PARK, FL 32789

**FEI Number:** 26-1965403

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARKS, LINDA G.T.  
203 LOOKOUT PLACE  
SUITE A  
MAITLAND, FL 32751 US

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

W&P SERVICES, INC.  
450 N. WYMORE ROAD  
WINTER PARK, FL 32789 US

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:** DAVIS A. WEBSTER

02/26/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** DEVP  
**Name:** HAYES, GEORGE L III  
**Address:** 4701 CENTRAL AVE. SUITE A  
**City-St-Zip:** ST. PETERSBURG, FL 33713

**Title:** DPT  
**Name:** PARKS, LINDA G.T.  
**Address:** 203 LOOKOUT PLACE  
**City-St-Zip:** MAITLAND, FL 32751

**Title:** S  
**Name:** WEBSTER, DAVID A  
**Address:** 450 N. WYMORE ROAD  
**City-St-Zip:** WINTER PARK, FL 32790

**Title:** VPA  
**Name:** MAISTER, VIKTOR  
**Address:** 3408 N. PROSPECT ROAD  
**City-St-Zip:** PEORIA, IL 61603

I hereby 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:** GEORGE L. HAYES

EVP

02/26/2010

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