## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000030029

City-St-Zip:

SANFORD, FL 32771

FILED Jul 05, 2006 Secretary of State

Entity Name: M AND L FLORIDA PROPERTIES INC.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
209 BRYN SANFORD	WOOD LANE , FL 32771				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
209 BRYN SANFORD	WOOD LANE , FL 32771				
FEI Number:	20-1114509	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
KLEINBERGER, STEVEN M 1411 EL CAPIN COURT WINTER SPRINGS, FL 32708 US			1411 EL CAJON COUR	KLEINBERGER, STEVEN M 1411 EL CAJON COURT WINTER SPRINGS, FL 32708 US	
The above in the State		submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: STEVEN	M. KLEINBERGER		07/05/2006	
	Electror	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ( ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( POPE, MARY \ 209 BRYNWOO SANFORD, FL	DD LANE	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( POPE, LEWIS 209 BRYNWOO SANFORD, FL	DD LANE	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	D ( POPE, LEWIS 208 S. ELLIOT		Title: ( Name: Address:	) Change ( ) Addition	

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MARY POPE Ρ 07/05/2006