

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000005709

**Entity Name:** MMRB INVESTMENTS, L.L.C.

**Current Principal Place of Business:**

10019 N. KENTALLEN  
OWASSO, OK 74055

**FILED**  
**Apr 19, 2013**  
**Secretary of State**  
**CC5405133404**

**Current Mailing Address:**

10019 N. KENTALLEN  
OWASSO, OK 74055

**FEI Number:** 20-2353147

**Certificate of Status Desired:** No

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

ALSOP, C. ROYCE  
889 SWAN DRIVE  
MARCO ISLAND, FL 34145 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SCORSONE, MARC A  
Address 10019 N. KENTALLEN  
City-State-Zip: OWASSO OK 74055

Title MGRM  
Name SCORSONE, MICHELLE L  
Address 10019 N. KENTALLEN  
City-State-Zip: OWASSO OK 74055

Title MGRM  
Name ALSOP, C. ROYCE  
Address 889 SWAN DRIVE  
City-State-Zip: MARCO ISLAND FL 34145

Title MGRM  
Name ALSOP, BARBARA G  
Address 889 SWAN DRIVE  
City-State-Zip: MARCO ISLAND FL 34145

*I hereby 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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARC A. SCORSONE

**MGRM**

**04/19/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date