


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jul 10, 2007 08:00 AM  
Secretary of State**

DOCUMENT # L05000004914 1. Entity Name WIL-JEN HOMES, LLC	
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Principal Place of Business 1891 LAKE SPIER DRIVE WINTER PARK, FL 32789	Mailing Address 1891 LAKE SPIER DRIVE WINTER PARK, FL 32789
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**DO NOT WRITE IN THIS SPACE**



07042007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2169457	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WILSON, RICHARD D  
1891 LAKE SPIER DRIVE  
WINTER PARK, FL 32789

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_


**Filing Fee is \$50.00  
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WILSON, RICHARD D 1891 LAKE SPIER DRIVE WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM WILSON, PATRICIA O 1891 LAKE SPIER DRIVE WINTER PARK, FL 32789
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JENSEN, THOMAS R P.O. BOX 66 TANGERINE, FL 32777
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000767569  
07/10/07-80009-022 50.00

**DO NOT WRITE IN THIS SPACE**

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:  7-4-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #