

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012633

FILED  
Mar 23, 2007  
Secretary of State

Entity Name: AMERIDONIA ENTERPRISES, LLC

**Current Principal Place of Business:**

1224 ALABAR LANE  
CAPE CORAL, FL 33909 US

**New Principal Place of Business:**

**Current Mailing Address:**

1224 ALABAR LANE  
CAPE CORAL, FL 33909 US

**New Mailing Address:**

FEI Number: 20-4252780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KING, MISTY D  
1204 ALABAR LANE  
CAPE CORAL, FL 33909 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KING, MISTY D  
Address: 1204 ALABAR LANE  
City-St-Zip: CAPE CORAL, FL 33909 US

Title: MGRM ( ) Delete  
Name: KING, WILLIAM  
Address: 1204 ALABAR LANE  
City-St-Zip: CAPE CORAL, FL 33909 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: KING, WILLIAM M  
Address: 1204 ALABAR LANE  
City-St-Zip: CAPE CORAL, FL 33909 US

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 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: WILLIAM M KING

MGRM

03/23/2007

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