2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L00000004718

1. Entity Name

Principal Place of Business

LONGBOAT KEY, FL 34228

3447 BYRON LANE

DAVIS SECURITIES, LLC



Mailing Address

3447 BYRON LANE

LONGBOAT KEY, FL 34228

FILED Apr 12, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For	
65-1017045		Not Applicable	
5. Certificate of Status Desired		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

DAVIS, JOHN C 3447 BYRON LANE LONGBOAT KEY, FL 34228

STREET ADDRESS CITY-ST-7IP

DO NOT WRITE IN THIS SPACE

the oblig	ve named entity submits this statement for the purpose of char ations of registered agent.	nging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		
=	Filing Fee is \$50.00 Due by May 1, 2007		14 / 1 . 1 . 1		
9.	MANAGING MEMBERS/MANAGERS				
NAME STREET ADDRESS CITY-ST-ZIP	MGR TORNEHL, TRUSTEE, KATHERINE D S W 283 N2141 BEACH ROAD PEWAUKEE, WI 53072		U00000702471		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S		U00000702471 04/20/07-80099-024 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	DO	NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	s	,			
TITLE					

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.

NATURE: Manager
SIGNATURE AND TYPED OR PRINTED MANE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Katherine D. Tornehl, Ttee
Manager
THORIZED REPRESENTATIVE
THORIZED REPRESENTATIVE
THORIZED REPRESENTATIVE

262-691-0455