# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 12, 2007**
**Secretary of State**

DOCUMENT# L00000005238

**Entity Name:** DRACKETT & OTT ENTERPRISES, LLC

**Current Principal Place of Business:**

745 12TH AVE SOUTH
STE. 105
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

745 12TH AVE SOUTH
STE. 105
NAPLES, FL 34102

**New Mailing Address:**

**FEI Number: 59-3633321** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

OTT, BARRETT C
745 12TH AVE. SOUTH
SUITE 105
NAPLES, FL 34102 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: | MGR ( ) Delete |
| Name: | OTT, BARRETT C |
| Address: | 745 12TH AVENUE SOUTH, SUITE 105 |
| City-St-Zip: | NAPLES, FL 34102 |
| Title: | MGR ( ) Delete |
| Name: | DRACKETT, WILLIAM |
| Address: | 614 WOOSTER PIKE |
| City-St-Zip: | TERRACE PARK, OH 45174 |

**ADDITIONS/CHANGES:**

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

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: BARRETT C. OTT MGR 02/12/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date