2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000001132

1. Entity Name

Principal Place of Business

PALM HARBOR, FL 34683

4705 ALTERNATE 19

UNIT B

PJW PROPERTIES, LLC



4705 ALTERNATE 19 Unit B

Mailing Address

PALM HARBOR, FL 34683

FILED Mar 08, 2007 08:00 AM Secretary of State



02272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 90-0002311

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLLINKA, DAVID J ESQUIRE 3204 ALTERNATE 19 NORTH PALM HARBOR, FL 34683

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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.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registored Agent signature required when reinstating) DATE	
9.	lling Fee is \$50.00 ue by May 1, 2007		
TITLE NAME STREET ADDRESS CITY-ST-7IP	MGR WIKLE, PAUL J 4705 ALTERNATE 19		

TITLE
NAME
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CITY-ST-ZIP

NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS

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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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Johnmy

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3/1/07

727-787-2727

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone ≱