


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 03, 2007 08:00 AM
Secretary of State

DOCUMENT # L02006005760 1. Entity Name DEBORAH J. DAVIS, LLC	
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Principal Place of Business 45 AKRON RD LAKE WORTH, FL 33467	Mailing Address 45 AKRON RD LAKE WORTH, FL 33467
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DO NOT WRITE IN THIS SPACE



07262007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 90-0058256	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

RODGERS, KAREN
 201 WOODLAND RD
 LAKE WORTH, FL 33461

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

1100000771379
08/03/07-80004-014 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAVIS, DEBORAH 45 AKRON RD LAKE WORTH, FL 33467
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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: Deborah J. Davis 2/26/07 561-301-4481

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