2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: JOE GUELLIE M. Williams
SIGNATURE DE TYPED OFFRINTED NAME OF SIGNING MANAGING MANAGING MANAGING

FILED Apr 20, 2006 8:00 am Secretary of State 04-20-2006 90022 028 ****50.00

Daytime Phone #

1. Entity Name WILLIAMS & WILLIAMS, LLC											
Principal Place 223 MARTIN PUNTA GORD	LUTHER KIN	NG BLVD.	Mailing Address PO BOX 510816 PUNTA GORDA, FL 33951			.	11 83 11 0 11881 8811 88 11 8		1878 bilbi 18 1	PR: 111 1881	
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01312006	Chg-LLC	CR2E08	3 (11/05)		
City & State			City & State		4. FEI Numb				plied For t Applicable		
Zip	Zip Country		Zip	Country		5. Certificate of Status Desired \$5.00 Additional Fee Required					
	6. Name	and Address of Current R	egistered Agent				7. Name and Address of New Registered Agent				
WILLIAMS, JACQUELINE					Name						
223 MARTIN LUTHER KING BLVD. PUNTA GORDA, FL 33950					Street Address (P.O. Box Number is Not Acceptable)						
					City	FL Zip Code					
	named entit	y submits this statement for	Led office or registe	ered agent, or b	oth, in the State of Fi		I. imiliar with,	and accept			
_	Ū	or printed name of registered agent an	d tile d cooligable /NOTI	E. Basintora	d Agent signature require	ud when reinetation)	· - ·	DATE			
	Signature, typeu	or printed haire or registered agent an	d the // applicacie. (NO)	. nogistero	a Agent signature require	o when remistating?	1	DATE	-		
Filing Fee is \$50.00 Due by May 1, 2006								ke check pa la Departme	-	•	
9. MANAGING MEMBEF				S/MANAGERS 10.			ADDITIONS/CHANGES				
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