

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000005873

Entity Name: WJG PROPERTIES, LLC

FILED
Oct 24, 2007
Secretary of State

Current Principal Place of Business:

1201 FLORESILLA DE AVILA
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

1201 FLORESILLA DE AVILA
TAMPA, FL 33613

New Mailing Address:

FEI Number: 17-3685300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILL, WILLIAM J
1201 FLORESILLA DE AVILA
TAMPA, FL 33614 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: GILL, WILLIAM J G.MGR
Address: 2509 W. CREST AVE
City-St-Zip: TAMPA, FL 33614

Title: MGR () Delete
Name: GILL, SHEREE V MGR
Address: 1201 FLORESILLA DE AVILA
City-St-Zip: TAMPA, FL 33613

Title: MGR (X) Delete
Name: GILL, DAVID L MGR
Address: C/O 1201 FLORESILLA DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GILL, WILLIAM J G.MGR
Address: 1201 FLORESILLA DE AVILA
City-St-Zip: TAMPA, FL 33613

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 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: WILLIAM J GILL

GMGR

10/24/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date