


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000012947 1. Entity Name PRATT HERRING WILSON MANAGEMENT, L.L.C.	
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Principal Place of Business 181 E. MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569	Mailing Address 181 E. MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569
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DO NOT WRITE IN THIS SPACE



03302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0170360	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 PRATT, CHARLES C 181 E. MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PRATT, CHARLES C 181 E MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PRATT, MEDORA C 181 E MIRACLE STRIP PARKWAY MARY ESTHER, FL 32569
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04/11/07-80044-005 50.00

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:


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

(Charles D. Pratt, Manager)

Date

3/30/07 (850) 986-2486

Daytime Phone #