2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000024288

1. Entity Name JOSEPH A. VILASI, PL



FILED Apr 17, 2007 08:00 AM Secretary of State

Principal Place of Business

206 SECOND STREET EAST BRADENTON, FL 34203

Mailing Address

206 SECOND STREET EAST BRADENTON, FL 34203



04092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
20-0079892		Not Applicable
5. Certificate of Status Desired		Additional

<u> </u>	The state of the s			1 de Maquirea			
	6. Name and Address of Current Registered Agent			to the state of th			
WICKMAN & WYCKOFF, P.A. 4909 MANATEE AVENUE WEST BRADENTON, FL 34209			DO NOT WRITE IN THIS SPACE				
	e named entity submits this statement for the purpose of changing its re tions of registered agent.	gistered office or registere	d agent, or both, in the State of Flo	orida. I am familiar with, and accept			
O.G. T. C. C.		Registered Agent signature required w	rhen reinstating)	DATE			
9.	iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBERS/MANAGERS	<u> </u>	<del></del>	<del></del>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VILASI, JOSEPH A 206 SECOND STREET EAST BRADENTON, FL 34203	The state of the s	·	kan di panganan kan kaban Kanganan kanan di mak Kanganan manganan kan			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT W	/RITE			
TITLE NAME STREET ADDRESS		Sangar Pilipan	IN THIS SE	PACE			

000000713056 04/26/07-80075-003 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:

TITLE
NAME 
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4/12/07

141-745-6829

Daytime Phone #