


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2007 08:00 AM
Secretary of State

| | |
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| DOCUMENT # L03000047745 1. Entity Name EDWARD MOTTL, LLC |  |
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|--|--|
| Principal Place of Business 4530 SE 47TH PL OCALA, FL 34480 US | Mailing Address 4530 SE 47TH PL OCALA, FL 34480 US |
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DO NOT WRITE IN THIS SPACE



03132007 No Chg-LLC CR2E083 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 16-1688439 | 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

**MOTTL, GEORGETTE
4530 SE 47TH PL
OCALA, FL 34480**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE: _____

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

U000000666550
03/23/07-80074-007 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM MOTTL, EDWARD 4530 SE 47TH PL OCALA, FL 34480 |
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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: Edward Mottl 3/13/07 (352) 694-5892

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