
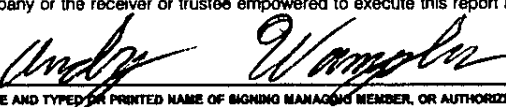


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L03000053034		
1. Entity Name ANDREW WAMPLER, LLC		
Principal Place of Business 2400 GERBER DAIRY RD. WINTER HAVEN, FL 33880	Mailing Address 2400 GERBER DAIRY RD. WINTER HAVEN, FL 33880	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WAMPLER, ANDREW 2400 GERBER DAIRY RD. WINTER HAVEN, FL 33880		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by September 14, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR WAMPLER, ANDREW 2400 GERBER DAIRY RD. WINTER HAVEN, FL 33880	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR WAMPLER, ORBIN W 2400 BERBER DAIRY RD. WINTER HAVEN, FL 33880	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRV HANDLEY, LORRAINE 238 N LAKE PATRICK RD. BABSON PARK, FL 33827	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		
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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		Date 9-9-07 Daytime Phone # 660 5342



07082007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 58-2678377	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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09/14/07-80005-021 55.00

