


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 07, 2007 8:00 am
Secretary of State

03-07-2007 90216 009 ****50.00

DOCUMENT # L04000019081

1. Entity Name
 WDVG ASSOCIATES TWO, LLC



Principal Place of Business 32 SPRING MEADOWS DRIVE ORMOND BEACH, FL 32174	Mailing Address 32 SPRING MEADOWS DRIVE ORMOND BEACH, FL 32174
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20005768



DO NOT WRITE IN THIS SPACE

01292007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2359916	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

BURNETT, RANDOM R
 501 N. GRANDVIEW AVENUE
 DAYTONA BEACH, FL 32118

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 reinstating) DATE _____


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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAYNES, DAVID C 32 SPRING MEADOWS DRIVE ORMOND BEACH, FL 32174
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DO NOT WRITE IN THIS SPACE

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:  **2-3-07 (386)677-5113**

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