

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034369

FILED  
Jun 18, 2007  
Secretary of State

Entity Name: MERCILDA WILLARD, LLC

**Current Principal Place of Business:**

12760 INDIAN ROCKS ROAD  
1097  
LARGO, FL 33774 US

**New Principal Place of Business:**

12760 INDIAN ROCKS ROAD  
1093  
LARGO, FL 33774 US

**Current Mailing Address:**

3060 MAINWAY  
STE 301  
BURLINGTON ON L7M 1A3,

**New Mailing Address:**

12760 INDIAN ROCKS RD  
1093  
LARGO, FL 33774 US

FEI Number: 20-1085784      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WINN, MARVIN  
131 FIRST STREET NW  
LARGO, FL 33770 US

**Name and Address of New Registered Agent:**

BURRIDGE, JOHN  
12760 INDIAN ROCKS RD  
1093  
LARGO, FL 33774 US

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.

SIGNATURE: J BURRIDGE

06/18/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SIMON, BARRINGTON L  
Address: 717 WOODHAVEN PLACE  
City-St-Zip: ANCASTER, ON L9G 5B1 CN

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SIMON, BARRINGTON L  
Address: 12760 INDIAN ROCKS RD #1093  
City-St-Zip: LARGO, FL 33774 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOHN BURRIDGE

MR

06/18/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date