


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000073084 1. Entity Name 12 SOUTH DIXIE LLC	
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Principal Place of Business 12 SOUTH DIXIE HIGHWAY, SUITE 203 LAKE WORTH, FL 34460	Mailing Address 12 SOUTH DIXIE HIGHWAY, SUITE 203 LAKE WORTH, FL 34460
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DO NOT WRITE IN THIS SPACE



01192007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 51-0526734	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 WENZEL, JOAN E 12 SOUTH DIXIE HIGHWAY, SUITE 203 LAKE WORTH, FL 34460

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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 _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WENZEL, JOAN E 12 SOUTH DIXIE HIGHWAY, SUITE 203 LAKE WORTH, FL 34460
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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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____