2907 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000077664

US

1. Entity Name MARCIA'S LLC



FILED Apr 25, 2007 08:00 Al Secretary of State

Principal Place of Business

136 LOWELL ROAD WINTER HAVEN, FL 33884 136 LOWELL ROAD WINTER HAVEN, FL 33884

Mailing Address

384 US



DO NOT WRITE IN THIS SPACE

04232007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-2216504

S. Certificate of Status Desired

Applied For Not Applicable

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LANG, MARCIA 136 LOWELL ROAD WINTER HAVEN, FL 33884

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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

Signature, typed or printed name of registered agent and title if applicable.

MANIAGING MEMBERS/MANIAGERS

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007 000000729055 05/08/07-80024-009 50.00 **

J.	10/17/00/10 MEMBER (0)/17/11/10/10
TITLE	MGRM LANG, MARCIA
NAME	
STREET ADDRESS	136 LOWELL ROAD
CITY-ST-ZIP	WINTER HAVEN, FL 33884
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
- NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 eath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Marcia

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/23/07

Daytime Phone #