

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90216 027 ****50.00

60015348



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1899740

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JANET E. MARTINEZ, P.A.
203 EAST RICH AVE.
DELAND, FL 32724

**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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	NYLEN, WILLIAM R
STREET ADDRESS	687 EAST KENTUCKY AVE.
CITY - ST - ZIP	DELAND, FL 32724
TITLE	MGR
NAME	NYLEN, NIZE R
STREET ADDRESS	687 EAST KENTUCKY AVE.
CITY - ST - ZIP	DELAND, FL 32724
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/30/07 386-734-5458