


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000082078 1. Entity Name WAYNE JUDY ENTERPRISES, LLC	
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Principal Place of Business 8175 ABINGDON COURT UNIVERSITY PARK, FL 34201	Mailing Address 8175 ABINGDON COURT UNIVERSITY PARK, FL 34201
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DO NOT WRITE IN THIS SPACE



08232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 02-0733321	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 OLIVER, JOHN D C/O ICARD, MERRILL, CULLIS, ET AL 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237

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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 reissuing)

Filing Fee is \$50.00 Due by September 6, 2006	U000000575554 08/29/06-200006-022 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES JUDY, LESLIE W 8175 ABINGDON CT UNIVERSITY PARK, FL 34201
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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: *Leslie Wayne Judy* **Aug. 23, 2006** **941-351-9775**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #