


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 13, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000084194 1. Entity Name ELIZABETH S. DELL, LLC	
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Principal Place of Business 109 WEST SILVER SPRINGS BOULEVARD OCALA, FL 34475	Mailing Address 109 WEST SILVER SPRINGS BOULEVARD OCALA, FL 34475
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DO NOT WRITE IN THIS SPACE



09102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2304501	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 GERSHOW, ELLEN R 203 NE 1ST STREET GAINESVILLE, FL 32601

**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 _____ (NOTE: Registered Agent signature required when resigning) DATE _____

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WACHOVIA BANK, N.A. 109 WEST SILVER SPRINGS BOULEVARD OCALA, FL 34475
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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: Connie E. Brown 9/11/2007 352-620-7130
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CONNIE E. BROWN, SR. VICE PRESIDENT & TRUST ADVISOR