

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084208

Entity Name: WILDER HAULING LLC

FILED
Apr 14, 2006
Secretary of State

Current Principal Place of Business:

5100 SANIBEL AVENUE
FT. PIERCE, FL 34951

New Principal Place of Business:

Current Mailing Address:

5100 SANIBEL AVENUE
FT. PIERCE, FL 34951

New Mailing Address:

FEI Number: 20-1916657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILDER, DONNA
5100 SANIBEL AVENUE
FT. PIERCE, FL 34951 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILDER, DONNA
Address: 5100 SANIBEL AVENUE
City-St-Zip: FT. PIERCE, FL 34951

Title: MGRM () Delete
Name: WILDER, THEODORE L JR.
Address: 5100 SANIBEL AVENUE
City-St-Zip: FT. PIERCE, FL 34951

Title: MGRM () Delete
Name: WILDER, THEODORE III
Address: 5100 SANIBEL AVENUE
City-St-Zip: FT. PIERCE, FL 34951

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: THEODORE WILDER JR

MGRM

04/14/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date