

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 24, 2007 08:00 AM
Secretary of State**

DOCUMENT # L05000012676

**1. Entity Name
COLWILL FAMILY DON PEDRO, LLC**



**Principal Place of Business
4605 CLARKSDALE LANE
BRANDON, FL 33511 US**

**Mailing Address
4605 CLARKSDALE LANE
BRANDON, FL 33511 US**



01212007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

**4. FEI Number
20-2348676**

**Applied For
Not Applicable**

5. Certificate of Status Desired

☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**JOHN H. RAINS III, P.A.
501 EAST KENNEDY BOULEVARD
SUITE 750
TAMPA, FL 33602**

**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 reappointing)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COLWILL, CHARLES C 4605 CLARKSDALE LANE BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COLWILL, DEBRA A 4605 CLARKSDALE LANE BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COLWILL, CHRISTOPHER R 4605 CLARKSDALE LANE BRANDON, FL 33511
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01/26/07-80017-025 50.00

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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 #

1/20/2007 813-241-2525