2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

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

DOCUMENT # L05000058545

1. Entity Name
JESSIE WILLIAMS, LLC



FILED Aug 17, 2007 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

184 GOLDEN GATE POINT SARASOTA, FL 34236 184 GOLDEN GATE POINT SARASOTA, FL 34236



08072007No Chg-LLC

CR2E083 (11/05)

4.	FEI Number		Applied For
	20-3269349		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

WILSON, MICHAEL J 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236

SIGNATURE:

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8-1-07

Davime Phone #

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						
Filing Fee is \$50.00 Due by September 14, 2007						
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LASHER, JUDY 184 GOLDEN GATE POINT SARASOTA, FL 34236					
TITLE NAME Street Address City-St-21P		08.	U00000772303 /17/07-80007-024 50.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO N	OT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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.						