## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000063561** 

1. Entity Name

ADVÉRTISING SIGNS THAT WORK LLC



FILED Mar 29, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2113 WILDWOOD LANE AUBURNDALE, FL 33823

AUBURNDALE, FL 33823

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

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2113 WILDWOOD LANE AUBURNDALE, FL 33823

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6. Name and Address of Current Registered Agent

P 3 003 1033 017 3003 017 31134 031111 041144 0	OM BOILD BLIBD MICH BLID BND MEDEL HL 1901
03012007 No Chg-LLC	CR2E083 (11/05)

4.	FEI Number		L	Applied For
	20-3058792			Not Applicable
	Cortificate of Status Desired	\$5.0	00	Additional

5. Certificate of Status

\$3.00 Addition Fee Required

BAKER, WILLIE J 2113 WILDWOOD LANE

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	named entity submits this statement for the purpose of challions of registered agent.	inging its registered office or registered agent, or both,	in the State of Florida. I am familiar with, and accept
SIGNATURE.			··
0.0,0,0,0	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2007		900000683607 04/05/07-80050-023 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	BAKER, WILLIE J		·
STREET ADDRESS	2113 WILDWOOD LANE		
CITY-ST-ZIP	AUBURNDALE, FL 33823	1	
TITLE NAME STREET ADDRESS			

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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: Willy One Boles Willy Joe Burer	3-22-07	863-669-E535
SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #