

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069947

FILED
Jan 31, 2007
Secretary of State

Entity Name: WEDLUND ENTERPRISES LLC

Current Principal Place of Business:

4946 SUNVIEW DRIVE
APOPKA, FL 32712

New Principal Place of Business:

136 BLUE POINTE WAY
#220
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

4946 SUNVIEW DRIVE
APOPKA, FL 32712

New Mailing Address:

136 BLUE POINTE WAY
#220
ALTAMONTE SPRINGS, FL 32701

FEI Number: 20-3169629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROUSE, RICHARD B
978 DOUGLAS AVE
SUITE 102
ALTAMONTE SPRINGS, FL 32714 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: WEDLUND, CAROLANN
Address: 4946 SUNVIEW DRIVE
City-St-Zip: APOPKA, FL 32712

Title: MGRM () Delete
Name: WEDLUND, STEPHEN L WEDLUND
Address: 4946 SUNVIEW DRIVE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEDLUND, CAROLANN
Address: 136 BLUE POINTE WAY #220
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM (X) Change () Addition
Name: WEDLUND, STEPHEN L WEDLUND
Address: 136 BLUE POINTE WAY #220
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: CAROLANN WEDLUND

MGRM

01/31/2007

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