

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000085787

**FILED**  
**Apr 17, 2006**  
**Secretary of State**

**Entity Name:** A.E. WELLS LLC

**Current Principal Place of Business:**

18151 MANTENO DR.  
SPRINGHILL, FL 34610 US

**New Principal Place of Business:**

**Current Mailing Address:**

18151 MANTENO DR.  
SPRINGHILL, FL 34610 US

**New Mailing Address:**

**FEI Number:** 56-2540868      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WELLS, ARNOLD E II  
18151 MANTENO DR.  
SPRINGHILL, FL 34610 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: MGR ( ) Delete  
Name: WELLS, ARNOLD E II  
Address: 18151 MANTENO DR.  
City-St-Zip: SPRINGHILL, FL 34610 US

**ADDITIONS/CHANGES:**

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: ARNOLD E WELLS II      MGR      04/17/2006

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