

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000090587

1. Entity Name
AC WILLOW, LLC



Principal Place of Business
111 NORTH POMPANO BEACH BLVD.
APT. 1403
POMPANO BEACH, FL 33062

Mailing Address
111 NORTH POMPANO BEACH BLVD.
APT. 1403
POMPANO BEACH, FL 33062



03092008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CINTRON, ALICE
111 NORTH POMPANO BEACH BLVD.
APT. 1403
POMPANO BEACH, FL 33062

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U000000920507
05/14/08-80047-002 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	CINTRON, ALICE
STREET ADDRESS	111 NORTH POMPANO BEACH BLVD. APT. 1403
CITY-ST-ZIP	POMPANO BEACH, FL 33062

TITLE	
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CITY-ST-ZIP	

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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:

Alice Cintron

4-20-2008 954-651-4690

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

Date

Daytime Phone #