2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100021

Entity Name: WILLARD HURLEY, LLC

City-St-Zip:

FILED Jan 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 111 N. CALHOUN ST. 517 E. COLLEGE AVENUE TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 **Current Mailing Address: New Mailing Address:** P.O. BOX 10007 TALLAHASSEE, FL 32302 FEI Number: 27-0131792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLARD, MATTHEW R WILLARD, MATTHEW R 111 N. CALHOUN ST. 517 E. COLLEGE AVENUE TALLAHASSEE, FL 32301 US US TALLAHASSEE, FL 32301 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: 01/24/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition WILLARD, MATTHEW R Name: Name: Address: P.O. BOX 10007 Address: City-St-Zip: TALLAHASSEE, FL 32302 City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition Name: Name: HURLEY, LISA M Address: Address: P.O. BOX 10007

City-St-Zip:

TALLAHASSEE, FL 32302

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: MATTHEW R. WILLARD MGRM 01/24/2007