## 2007 LIMITED LIABILITY-COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L05000108303** 

1. Entity Name
WARRING & WARRING 2. LLC



FILED Jan 23, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

7106 NW 18TH AVENUE GAINESVILLE, FL 32605

7106 NW 18TH AVENUE GAINESVILLE, FL 32605



01112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 11-3771725 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WARRING, MARK 7106 NW 18TH AVENUE GAINESVILLE, FL 32605

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	pove named entity submits this statement for the purpose of cha ofigations of registered agent.	anging its registered office or registered agent, or both, in the S	tate of Florida. I am familiar with, and accept
SIGNATO	JRE		
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS	MANAGING MEMBERS/MANAGERS	
TITLE	MCDM		

NAME WARRING, W.D. STREET ADDRESS 7302 NW 18TH AVENUE CITY-ST-ZIP GAINESVILLE, FL 32605 TITLE NAME WARRING, MARK STREET ADDRESS 7106 NW 18TH AVENUE CITY-ST-ZIP GAINESVILLE, FL 32605 NAME STREET ADDRESS CITY-ST-ZIP

000000599410 01/25/07-80027-005 50.00

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11. I hereby certify that the information supplied with this filling 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:

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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

1.16.07

352-333-8400

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

Date

Daytime Phone #