

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000028032

FILED
Jan 10, 2007
Secretary of State

Entity Name: WILL'S MAINTENANCE LLC

Current Principal Place of Business:

505 HICKORY LANE
HAVANA, FL 32333

New Principal Place of Business:

Current Mailing Address:

505 HICKORY LANE
HAVANA, FL 32333

New Mailing Address:

FEI Number: 80-0803075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHRINER, WILL
505 HICKORY LANE
HAVANA, FL 32333 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: SHRINER, WILL
Address: 505 HICKORY LANE
City-St-Zip: HAVANA, FL 32333

Title: MGR () Delete
Name: MOORE, MATT
Address: 1562 CALDWELL DRIVE
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGR () Delete
Name: COPPER, JOSH
Address: 1562 CALDWELL DRIVE
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGR () Delete
Name: BRUCE, MICHAEL
Address: 1621 STANLEY AVE
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILL SHRINER

MGRM

01/10/2007

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