

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033132

Entity Name: VILLAS AM MEER, LLC

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

5115 16TH AVENUE SOUTH
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

5115 16TH AVENUE SOUTH
TAMPA, FL 33619

New Mailing Address:

FEI Number: 20-5031432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, KRISTOPHER E ESQ
114 SOUTH FREMONT AVENUE
TAMPA, FL 33606 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: STATEWIDES ASSOCIATE, S, INC.
Address: 5115 16TH AVENUE SOUTH
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STATEWIDE ASSOCIATES, , INC.
Address: 5115 16TH AVENUE SOUTH
City-St-Zip: TAMPA, FL 33619

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: STATEWIDE ASSOCIATES, INC.

MGR

01/10/2007

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