2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047953

City-St-Zip:

MELBOURNE BEACH, FL 32951

Entity Name: MIHLEBACH & WILLMAN LLC

FILED Mar 14, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5270 FISHERMAN LANE GRANT, FL 32949 **Current Mailing Address: New Mailing Address:** 5270 FISHERMAN LANE GRANT, FL 32949 FEI Number: 20-4840949 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: WILLMAN, DEBRA A 5270 FISHERMAN LANE GRANT, FL 32949 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: ADDITIONS/CHANGES: () Delete Title: () Change () Addition WILLMAN, DEBRA A Name: Name: Address: 5270 FISHERMAN LANE Address: City-St-Zip: GRANT, FL 32949 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: WILLMAN, DANNY Name: Address: 5270 FISHERMAN LANE Address: City-St-Zip: GRANT, FL 32949 City-St-Zip: Title: MGR () Delete Title: () Change () Addition MIHLEBACH, MARK Name: Name: Address: 5195 PALM DRIVE Address: City-St-Zip: MELBOURNE BEACH, FL 32951 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: LIANE, MIHLEABCH Name: Address: 5195 PALM DRIVE Address:

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.

City-St-Zip:

SIGNATURE: DEBRA A WILLMAN MGR 03/14/2007