

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073891

Entity Name: WILCOX MOUNT ROYAL, LLC

FILED  
May 25, 2007  
Secretary of State

## Current Principal Place of Business:

C/O C. PAUL WILCOX  
136 WILLIAM BARTRAM DRIVE  
WELAKA, FL 32139

## New Principal Place of Business:

C/O WILLANELLE WILCOX  
136 WILLIAM BARTRAM DRIVE  
WELAKA, FL 32139

## Current Mailing Address:

PO BOX 297  
WELAKA, FL 321930297

## New Mailing Address:

PO BOX 1100  
WELAKA, FL 32193

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

AKEL, EDWARD C  
ONE INDEPENDENT DRIVE STE 2301  
JACKSONVILLE, FL 32202 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: MOUNT ROYAL FAMILY I, NVESTMENTS, IN C .  
Address: 136 WILLIAM BARTRAM DRIVE  
City-St-Zip: WELAKA, FL 32193

## ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify 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: MARY ANN ANDERSON

MGR

05/25/2007

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