

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075376

Entity Name: WEB FAMILY CIRCLE, LLC

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

2220 CR 210 W.
SUITE 108 BOX 132
JACKSONVILLE, FL 32259

New Principal Place of Business:

1256 SPLENDID RAVINE ST
SAINT AUGUSTINE, FL 32092

Current Mailing Address:

2220 CR 210 W.
SUITE 108 BOX 132
JACKSONVILLE, FL 32259

New Mailing Address:

1256 SPLENDID RAVINE ST
SAINT AUGUSTINE, FL 32092

FEI Number: 86-1176663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, GRANT
9380 LENNEX LN #711
FORT MYERS, FL 33919 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: CARBONE, ASHLEY
Address: 1256 SPLENDID RAVINE ST.
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM () Delete
Name: BLACK, GRANT
Address: 9380 LENNEX LN #711
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES:

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: ASHLEY CARBONE

MGRM

01/16/2007

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