2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000098973

Entity Name: DRAFT-IT-RIGHT LLC

Current Principal Place of Business:

FILED Mar 06, 2007 Secretary of State

9210 N. LENNOX TER CITRUS SPRINGS, FL 34434 **Current Mailing Address: New Mailing Address:** 9210 N. LENNOX TER CITRUS SPRINGS, FL 34434 FEI Number: 61-1511079 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: MIKEL, EDNA 9210 N. LENNOX TER CITRUS SPRINGS, FL 34434 US 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: MIKEL, JAMES A

 Name:
 MIKEL, JAMES A

 Address:
 2345 N. 118 STREET

 City-St-Zip:
 WAUWATOSA, WI 53226

 Title:
 MGRM () Delete

 Name:
 MIKEL, DANA A

 Address:
 2345 N. 118 STREET

City-St-Zip: WAUWATOSA, WI 53226
Title: MGRM () Delete

 Name:
 BREAZEALE, JUDY

 Address:
 2345 N. 118 STREET

 City-St-Zip:
 WAUWATOSA, WI 53226

City-St-Zip:

ADDITIONS/CHANGES:

Title:

Title:

Name:

Name:

Address:

City-St-Zip:

Address:

Name:

Address:

New Principal Place of Business:

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

() Change () Addition

() Change () Addition

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: JAMES A MIKEL MGRM 03/06/2007