

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119428

Entity Name: WOERNER-COLORADO, LLC

FILED  
Feb 09, 2007  
Secretary of State

**Current Principal Place of Business:**

PHILLIPS POINT EAST TOWER  
777 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH, FL 334016161

**New Principal Place of Business:**

**Current Mailing Address:**

PHILLIPS POINT EAST TOWER  
777 SOUTH FLAGLER DRIVE, SUITE 1100  
WEST PALM BEACH, FL 334016161

**New Mailing Address:**

FEI Number: 20-8109479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PANZL, JOSEPH R ESQ.  
163 EAST MORSE BLVD., SUITE 200  
WINTER PARK, FL 32789 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: CT ( ) Change (X) Addition  
Name: WOERNER, LESTER J  
Address: 777 S FLAGLER DR, SUITE 1100E  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: PS ( ) Change (X) Addition  
Name: WILLIAMS, T. DAVID JR.  
Address: 777 S FLAGLER DR, SUITE 1100E  
City-St-Zip: WEST PALM BEACH, FL 33401

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: T. DAVID WILLIAMS, JR.

PS

02/09/2007

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