2006 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Feb 06, 2006 08:00 AN DOCUMENT # L98000001926 Secretary of State 1. Entity Name JOAN WILLIAMS, LLC Mailing Address Principal Place of Business 5357 COBBLESTONE COURT 5357 COBBLESTONE COURT WESLEY CHAPEL, FL 33543 WESLEY CHAPEL, FL 33543 01172006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3534789 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE KRUGER, ROBERT W 5357 COBBLE STONE COURT WESLEY CHAPEL, FL 33543 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SiGNATURE Signature, typed or printed name of registered. John and title if applicable. DATE (NOTE: Registered Agent signature required when minstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9, **MGRM** TITLE NAME KRUGER, ROBERT W STREET ADDRESS 5357 COBBLE STONE COURT WESLEY CHAPEL, FL 33543 CITY-ST-ZIP TITLE U00000423421 02/18/06-80007-003 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE City-St-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS City-ST-ZIP NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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: eignature and typed or printed name of signing wanading member, or authorized representative

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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