

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001162

Entity Name: WIRGES & MEEKER, C.P.A.'S, L.C.

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

1346 W. FLETCHER AVE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

1346 W. FLETCHER AVE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 52-2142367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEEKER, TAMMY A
19002 CHEMILLE DR.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

MEEKER-BAUMAN, TAMMY K
19002 CHEMILLE DR.
LUTZ, FL 33558 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: TAMMY K. MEEKER-BAUMAN

01/03/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WIRGES, FRANK F JR.
Address: 4601 FAIRWAY DR.
City-St-Zip: TAMPA, FL 33603

Title: MGRM () Delete
Name: MEEKER, TAMMY K
Address: 19002 CHEMILLE DR.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WIRGES, FRANK F JR.
Address: 1346 WEST FLETCHER AVE
City-St-Zip: TAMPA, FL 33612

Title: MGRM (X) Change () Addition
Name: MEEKER-BAUMAN, TAMMY K
Address: 19002 CHEMILLE DR.
City-St-Zip: LUTZ, FL 33558

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: TAMMY K. MEEKER-BAUMAN

MGRM

01/03/2007

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