## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 12, 2007 08:00 AM Secretary of State

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1. Entity Name

DAVID TAYLOR & ASSOCIATES, LLC



Principal Place of Business

Mailing Address

170 MAIN STREET, G11 TEWKSBURY, MA 01876 170 MAIN STREET, G11 TEWKSBURY, MA 01876



## DO NOT WRITE IN THIS SPACE

03052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
02-0511471	_	Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

SIGNATURE AND TY

## DO NOT WRITE IN THIS SPACE

-2007

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bo	Ih. in the State of Florida. ↓am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TAYLOR, BRUCE C 170 MAIN STREET, G11 TEWKSBURY, MA 01876		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANZILLO, MARY 170 MAIN STREET, G11 TEWKSBURY, MA 01876		000000663868 03/22/07-80021-013 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS 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 employered to execute this report as required by Chapter 608, Florida Statutes

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE