2007 LIMITED LIABILITY COMPANY

May 03, 2007 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # L04000034841 1. Entity Name WINTER HOLDINGS, LLC Principal Place of Business Mailing Address 2515 PARKVIEW STREET 2515 PARKVIEW STREET TAMPA, FL 33629 TAMPA, FL 33629 04242007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1699456 Not Apolicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent JEFFRIES, DAVID M DO NOT WRITE 101 EAST KENNEDY BOULEVARD, SUITE 300 TAMPA, FL 33602 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE UUDUUU 750098 Filing Fee is \$50.00 05/24/07-80068-024 50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE NAME WINTER, DAVID STREET ADDRESS 2515 PARKVIEW ST CITY-ST-ZIP TAMPA, FL 33629 TITLE NAME STREET ADDRESS CHY-ST-7IP STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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

FILED