

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114777

FILED
Mar 24, 2009
Secretary of State

Entity Name: WOODLAND NUGENE FIELD, LLC

Current Principal Place of Business:

507 FORREST STREET, SEASIDE
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4624
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEATHERSBY, NANCY
507 FORREST STREET, SEASIDE
SANTA ROSA BEACH, FL 32459 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: MGR () Delete
Name: WEATHERSBY, E. WOODS
Address: 1000 RIDGEWAY LOOP ROAD, SUITE 200
City-St-Zip: MEMPHIS, TN 38120

Title: MGR () Delete
Name: WEATHERSBY, FRANK M III
Address: 467 ABALONE COURT, SUITE 502
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGR () Delete
Name: WEATHERSBY, FRANK M JR.
Address: 4019 DUMAINE WAY
City-St-Zip: MEMPHIS, TN 38117

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: E WOODS WEATHERSBY

MGR

03/24/2009

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