

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000003125

**Entity Name:** WINDVEST, LLC

**Current Principal Place of Business:**

520 N. MAIN STREET  
#213  
HEBER CITY, UT 84032

**Current Mailing Address:**

520 N. MAIN STREET  
#213  
HEBER CITY, UT 84032 US

**FEI Number:** 65-1169552

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NADER, DAVID A  
520 N MAIN STREET  
#213  
HEBER CITY, FL 84032 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	NADER, DAVID A	Name	HORNE, THOMAS CHAD
Address	520 N. MAIN STREET #213	Address	289 BAYSIDE DRIVE
City-State-Zip:	HEBER CITY UT 84032	City-State-Zip:	CLEARWATER BEACH FL 33767

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID A NADER

MGRM

02/23/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date