

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000673

FILED
Jun 19, 2007
Secretary of State

Entity Name: WYNDCREST BABY UNIVERSE HOLDINGS, LLC

Current Principal Place of Business:

11450 SE DIXIE HIGHWAY STE 204
HOBE SOUND, FL 33455

New Principal Place of Business:

150 US HIGHWAY ONE, SUITE 500
JUPITER, FL 33477

Current Mailing Address:

11450 SE DIXIE HIGHWAY STE 204
HOBE SOUND, FL 33455

New Mailing Address:

150 US HIGHWAY ONE, SUITE 500
JUPITER, FL 33477

FEI Number: 65-0967233 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TEXTOR, JOHN
11450 SE DIXIE HIGHWAY STE 204
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

TEXTOR, JOHN
150 US HIGHWAY ONE
JUPITER, FL 33477 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: JOHN TEXTOR

06/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TEXTOR VENTURES, INC., .
Address: 11450 SE DIXIE HIGHWAY STE 204
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WYNDCREST HOLDINGS,, LLC
Address: 150 SOUTH US HIGHWAY ONE, SUITE 500
City-St-Zip: JUPITER, FL 33477

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: JOHN TEXTOR

PRES

06/19/2007

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