2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L00000003449

1. Entity Name
WN28, LLC

Principal Place of Business	Mailing Address
3333 WEST KENNEDY BLVD., SUITE 206 TAMPA, FL 33609	3333 WEST KENNEDY BLVD., SUITE 206 TAMPA, FL 33609

01032008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3634600
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CURTIS, ROBERT T
3333 WEST KENNEDY BLVD., SUITE 206
TAMPA, FL 33609

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000781965
01/15/08-80056-011 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	CURTIS, ROBERT T
STREET ADDRESS	3333 W KENNEDY BLVD., STE 206
CITY-ST-ZIP	TAMPA, FL 33609
TITLE	MGR
NAME	CURTIS, WILLIAM P
STREET ADDRESS	3333 W KENNEDY BLVD., STE 206
CITY-ST-ZIP	TAMPA, FL 33609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Robert T. Curtis 1/7/08 813-875-6324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #