2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000013182								FILED									
WYNDHAM HEIGHTS LAND DEVELOPMENT, L.L.C.							O'I MAY	II AF	9: 3	3							
							SECRET	ARY OF	I STAT	F							
Principal Plac		Mailing Address					TALLAHA	SSEE.	FLORI	ĎΑ							
WESTON FL	n Rd., Ste. 105 33331	WESTON FL 33331	2500 Weston Rd., Ste. 105 Weston Fl 33331														
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address			- 1,000;40;1,00;10,00;1											
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE											
City & State	e	City & State	City & State			4. FEI Number			Applied For								
Zip Country		Zip	Country	5. Ceri		. Certific	ificate of Status Desired		Not Applicable \$5.00 Additional								
	6. Name and Address of Curre	ent Registered Agent	ered Agent			7. Name and Address of New Registered Agent											
					Name .												
	, edward Paul ESQ. Ston RD., STE. 220			Street Address (P.O. Box Number is Not Acceptable				ceptable)									
	FL 33331								i								
			City						FL Zip Code								
8. The above named entity submits this statement for the purpose of changing its registered office or regist							both, in the Sta	ite of Florid	a.								
SIGNATURE																	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required							4000				7						
FILE NOW!!! F Make Check Payable to				-	.1111			 	1/0101059002 50.00 *****50.00								
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STREET ADDRESS CITY-ST-ZIP			STREET CITY-ST	ADDRESS T-ZIP				-									
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and section 119.07(3)(ii), Florida Statutes.																	
limited lia	bility company or the receiver or trus	the empowered to execute this re	port as re	equired by	Chapter (608, Flori	11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 of true empowered to execute this report as required by Chapter 608, Florida Statutes.										

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

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