

**2003 LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 22, 2003 8:00 am**  
**Secretary of State**

01-22-2003 90086 016 \*\*\*\*50.00

0026245

**DOCUMENT # L00000013182**

1. Entity Name

**WYNDHAM HEIGHTS LAND DEVELOPMENT, L.L.C.**



Principal Place of Business

**2500 WESTON RD., STE. 105  
WESTON FL 33331**

Mailing Address

**2500 WESTON RD., STE. 105  
WESTON FL 33331**

**20013884**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1057421**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KREILING, EDWARD PAUL ESQ.  
2500 WESTON RD., STE. 220  
WESTON FL 33331**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 \$50.00  
Make Check Payable to Florida Department of State  
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>MGRM</b>									
	<b>MACHADO, JESUS</b>									
	<b>2500 WESTON RD., #105</b>									
	<b>WESTON FL 33331</b>									
	<b>MGRM</b>									
	<b>L &amp; I LLC</b>									
	<b>104 DOCKSIDE CIR</b>									
	<b>WESTON FL 33327</b>									
	<b>MGRM</b>									
	<b>HERNANDEZ, MARIO</b>									
	<b>2972 WESTBROOK</b>									
	<b>WESTON FL 33332</b>									
	<b>MGRM</b>									
	<b>ORTIZ, DAVID</b>									
	<b>2500 WESTON RD., #105</b>									
	<b>WESTON FL 33331</b>									

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:**

**SIGNATURE REQUIRED**

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

Date

Daytime Phone #

CR2E083 (10/02)