2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000003456

1. Entity Name
WINTER PARK, L.L.C.

Principal Place of Business	Mailing Address
301 WEST CAMINO GARDENS BLVD STE 101 BOCA RATON, FL 33432	PO BOX 352 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

01092008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

MACHEN, JIM D
301 WEST CAMINO GARDENS BLVD., STE 101
BOCA RATON, FL 33432

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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

U000000837463
03/04/08-80058-012 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MEM	
NAME	STEPHEN M BAILEY, SELF DIRECTED	
STREET ADDRESS	PO BOX 352	
CITY-ST-ZIP	BOCA RATON, FL 33432	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
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NAME		
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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 _Stephen M. Bailey_   Stephen M. Bailey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #