2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000008046

1. Entity Name
WINDSOR HOSPITALITY, LLC



FILED Feb 25, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

13212 WHITE CEDAR CT. ORLANDO, FL 32828 13212 WHITE CEDAR CT. ORLANDO, FL 32828



02162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3221413 Applied For Not Applicable

to.

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PATEL, SHAILESH 13212 WHITE CEDAR CT. ORLANDO, FL 32828

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chan ions of registered agent.	iging its registered	d office or registered agent, or both,	in the State of Florida. I am familia		
"SIGNATURE1	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered	Agent signature required when reinstating)	DATE		
FILE After May	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75		,	-		
9.	MANAGING MEMBERS/MANAGERS		-			
TITLE	MGR					
NAME	PATEL, SHAILESH			U00000840235 03/06/08-80040-014 138.75		
STREET ADDRESS	13212 WHITE CEDAR CT					
CITY-ST-ZIP	ORLANDO, FL 32828					
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STREET ADDRESS						

11. I hereby certify that to 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 mook 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 combany. The receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

CITY-ST-ZIP

STREET ADDRESS
CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP

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

Feb 21,08

Daytime Phoni