2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000002194

1. Entity Name

WINDERMERE WATERFORD LAKES, LLC



Principal Place of Business

13100 W. COLONIAL DRIVE WINTER GARDEN, FL 34787

Mailing Address

13100 W. COLONIAL DRIVE WINTER GARDEN, FL 34787

FILED Apr 14, 2008 8:00 am Secretary of State

04-14-2008 90224 047 ***138.75

60022454



03212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	
59-0623383	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCPHERSON, REX V II 13100 W. COLONIAL DRIVE WINTER GARDEN, FL 34787

SIGNATURE:

DO	NO:	T WF	RITE
	a part of the same	100 2	1 . PAR 2 . S.
IN.	THIS	CD	
3 11 4 3	i isiio	, Ol ,	70 L

04/10/08

(407) 656-2291

Daytime Phone #

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	
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS	the time and the first of the second	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WINDERMERE GROVES, INC. 13100 W. COLONIAL DRIVE WINTER GARDEN, FL 34787			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCPHERSON, REX V II 13100 W COLONIAL DR WINTER GARDEN, FL 347873953			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT V	VRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I heroby certify that the information supplied with this filling 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 ilability company or the receiver of trustee expowered to execute this report as required by Chapter 608, Florida Statutes.				

Rex V. McPherson, II

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