

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005124

FILED
Feb 03, 2005
Secretary of State

Entity Name: WF BOATING AND THERAPY CLUB, LLC

Current Principal Place of Business:

18060 OTTER WATER WAY
ALVA, FL 33920

New Principal Place of Business:

Current Mailing Address:

18060 OTTER WATER WAY
ALVA, FL 33920

New Mailing Address:

FEI Number: 56-2354341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROOKMAN, STEVEN P
18060 OTTER WATER WAY
ALVA, FL 33920 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: GR () Delete
Name: DALTRY, WAYNE
Address: 1905 LONGFELLOW DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DALTRY, WAYNE
Address: 1905 LONGFELLOW DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: MGR () Change (X) Addition
Name: BROOKMAN, STEVEN P
Address: 18060 OTTER WATER WAY
City-St-Zip: ALVA, FL 33920 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: STEVEN P. BROOKMAN

MGR

02/03/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date