2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2009
Secretary of State

DOCUMENT# L03000024006

Entity Name: WHITAKER GARDENS LLC

Current Principal Place of Business:

6891 CO HWY 280 E
DE FUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

6891 CO HWY 280 E
DE FUNIAK SPRINGS, FL 32435

New Mailing Address:

FEI Number: 01-0790533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBINSON, CRAIG S CPA
38 S 8TH ST
DE FUNIAK SPRINGS, FL 32435 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/MANAGERS:

Title:	MGRM	( ) Delete
Name:	WHITAKER, JAMES W	
Address:	6891 CO HWY 280 E	
City-St-Zip:	DE FUNIAK SPRINGS, FL 32435	
Title:	MGRM	( ) Delete
Name:	WHITAKER, JAMES W II	
Address:	6891 CO HWY 280 E	
City-St-Zip:	DE FUNIAK SPRINGS, FL 32435	
Title:	MGRM	( ) Delete
Name:	WHITAKER, APRIL V	
Address:	6891 CO HWY 280 E	
City-St-Zip:	DE FUNIAK SPRINGS, FL 32435	
Title:	MGRM	( ) Delete
Name:	WHITAKER, ANNIE M	
Address:	6891 CO HWY 280 E	
City-St-Zip:	DE FUNIAK SPRINGS, FL 32435	
Title:	MGRM	( ) Delete
Name:	WHITAKER, JAMIE L	
Address:	6891 CO HWY 280 E	
City-St-Zip:	DE FUNIAK SPRINGS, FL 32435	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES W WHITAKER II MGRM 02/23/2009

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