

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000039940 1. Entity Name WINDSOR OAKS, LLC	
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Principal Place of Business 8 PINE STREET WINDERMERE, FL 34786	Mailing Address 8 PINE STREET WINDERMERE, FL 34786
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02012006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0525294	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SOUTH, J. TODD ESQ MILLER, SOUTH, MILHAUSEN & CARR, P.A. 2699 LEE ROAD, STE. 120 WINTER PARK, FL 32789
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**DO NOT WRITE
IN THIS SPACE**

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 registering.) DATE: _____

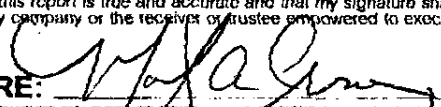
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SOUTH, J. TODD 8 PINE STREET WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CRONE, MARK A 1050 S. LAKE SYBELIA DR. MAITLAND, FL 32751
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03/03/06-80046-003 50.00

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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:  **MANAGER** **02-16-06** **407-539-1070**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE One Daytime Phone #