

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000018971

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** WITHLACOOCHEE RIVER RV PARK AND CANOE RENTAL, LLC

**Current Principal Place of Business:**

39847 SR 575  
LACOOCHEE, FL 33537

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 114  
LACOOCHEE, FL 335370114

**New Mailing Address:**

**FEI Number:** 20-0774553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WILSON-HARRIS, JACQUILYN  
39849 SR 575  
LACOOCHEE, FL 33537 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: P ( ) Delete  
Name: WILSON-HARRIS, JACQUILYN  
Address: 39849 SR 575  
City-St-Zip: LACOOCHEE, FL 33537

Title: V ( ) Delete  
Name: O'TOOLE, RICHARD  
Address: 12169 SW 49 CT.  
City-St-Zip: COOPER CITY, FL 33330

Title: S ( ) Delete  
Name: POST, KARI  
Address: 3256 RIVER DR.  
City-St-Zip: FT. PIERCE, FL 34981

Title: T ( ) Delete  
Name: SULLIVAN, JAMES  
Address: 10418 SW 53RD ST.  
City-St-Zip: COOPER CITY, FL 33328

**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:

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:** JACQUILYN WILSON-HARRIS

P

04/30/2009

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