

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026390

FILED  
Mar 13, 2009  
Secretary of State

**Entity Name:** WINDES FAMILY ENTERPRISES, LLC

**Current Principal Place of Business:**

111 TANG D MAR DR  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

111 TANG D MAR DR  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

**FEI Number:** 20-0424499

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAVENS, JASON E  
4400 HWY 20 STE 211  
NICEVILLE, FL 32578 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: WINDES, DAVID E  
Address: 111 TANG O MAR DR  
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: MGRM ( ) Delete  
Name: WINDES, MYLINDA R  
Address: 111 TANG O MAR DR  
City-St-Zip: MIRAMAR BEACH, FL 32550

**ADDITIONS/CHANGES:**

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:** DAVID E. WINDES

MGMR

03/13/2009

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