

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000026390

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

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

**Current Principal Place of Business:**

111 TANG-O- MAR DRIVE  
MIRAMAR BEACH, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

111 TANG-O- MAR DRIVE  
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  
Name: WINDES, DAVID E  
Address: 111 TANG-O- MAR DRIVE  
City-St-Zip: MIRAMAR BEACH, FL 32550

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

I hereby 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

MGRM

04/26/2011

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