

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90210 001 ****50.00
03-24-2005 90210 002 *****5.00

30002391



03152005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L04000030039 1. Entity Name WINDSOR PARK OF COMMERCE, LLC																													
Principal Place of Business 1340 U.S. HIGHWAY ONE, #102 JUPITER, FL 33469			Mailing Address 1340 U.S. HIGHWAY ONE, #102 JUPITER, FL 33469																										
2. Principal Place of Business 5055 North A1A Suite, Apt. #, etc.		3. Mailing Address 5055 North A1A Suite, Apt. #, etc.																											
City & State Vero Beach, FL Zip 32963 Country USA		City & State Vero Beach, FL Zip 32963 Country USA		4. FEI Number 05-0602260																									
5. Certificate of Status Desired XXX		Applied For Not Applicable																											
6. Name and Address of Current Registered Agent LOMBARDI, VICTOR 1340 U.S. HIGHWAY ONE, #102 JUPITER, FL 33469																													
7. Name and Address of New Registered Agent Name Lombardi, Victor A Street Address (P.O. Box Number is Not Acceptable) 5055 North A1A City Vero Beach State FL Zip Code 32963																													
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 <i>[Signature]</i> Victor A. Lombardi, MGRM <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																													
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State																										
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">LOMBARDI, VICTOR</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">1340 U.S. HIGHWAY ONE, #102</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">JUPITER, FL 33469</td> </tr> </table> </div> <div style="width: 48%;"> 10. ADDITIONS/CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">MGRM</td> <td style="width: 20%;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2">Lombardi, Victor A.</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">5055 North A1A</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">Vero Beach, FL 32963</td> </tr> </table> </div> </div>						TITLE	MGRM	<input type="checkbox"/> Delete	NAME	LOMBARDI, VICTOR		STREET ADDRESS	1340 U.S. HIGHWAY ONE, #102		CITY-ST-ZIP	JUPITER, FL 33469		TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	Lombardi, Victor A.		STREET ADDRESS	5055 North A1A		CITY-ST-ZIP	Vero Beach, FL 32963	
TITLE	MGRM	<input type="checkbox"/> Delete																											
NAME	LOMBARDI, VICTOR																												
STREET ADDRESS	1340 U.S. HIGHWAY ONE, #102																												
CITY-ST-ZIP	JUPITER, FL 33469																												
TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																											
NAME	Lombardi, Victor A.																												
STREET ADDRESS	5055 North A1A																												
CITY-ST-ZIP	Vero Beach, FL 32963																												
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM LOMBARDI, VICTOR 1340 U.S. HIGHWAY ONE, #102 JUPITER, FL 33469																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM RENZULLI, EDWARD 6499 N. POWERLINE ROAD, SUITE 301 FT. LAUDERDALE, FL 33309																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH M 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
TITLE NAME STREET ADDRESS CITY-ST-ZIP			MGRM FOGLIA, JOSEPH J 7428 WILES ROAD CORAL SPRINGS, FL 33067																										
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>[Signature]</i> Victor A. Lombardi, MGRM <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>																													