

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000042049

Entity Name: TOWI A WI PLANTATION, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

9428 BAYMEADOWS ROAD
SUITE 230
JACKSONVILLE, FL 32256

Current Mailing Address:

9428 BAYMEADOWS ROAD
SUITE 230
JACKSONVILLE, FL 32256

New Principal Place of Business:

9995 GATE PARKWAY N
SUITE 400
JACKSONVILLE, FL 32246

New Mailing Address:

9995 GATE PARKWAY N
SUITE 400
JACKSONVILLE, FL 32246

FEI Number: 20-1227645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURLEY, CHARLES R JR
1301 RIVERPLACE BLVD, STE 1500
JACKSONVILLE, FL 32207 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: THE ARCHER GROUP
Address: 9428 BAYMEADOWS ROAD SUITE 230
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR () Delete
Name: CURY, PHIL
Address: 9995 GATE PARKWAY N, STE 400
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THE ARCHER GROUP
Address: 9995 GATE PARKWAY N SUITE 400
City-St-Zip: JACKSONVILLE, FL 32246

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: TIM RITCH

MGRM

04/15/2009

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