


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 31, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000051480</b> 1. Entity Name WENTWORTH ENTERPRISES, LLC	
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Principal Place of Business 8423 N. NEBRASKA AVE TAMPA, FL 33604	Mailing Address 8423 N. NEBRASKA AVE TAMPA, FL 33604
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**DO NOT WRITE IN THIS SPACE**



01042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 06-0545508	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WENTWORTH, CHARLES  
8423 N. NEBRASKA AVE  
TAMPA, FL 33604

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000807347  
02/07/08-80002-026 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WENTWORTH, CHARLES 904 E FLORA ST TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WENTWORTH, CASSANDRA 8423 N. NEBRASKA AVE TAMPA, FL 33604
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Charles Wentworth 1/24/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #