

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054529

Entity Name: WINTER GARDEN PIE LLC

FILED
Mar 08, 2005
Secretary of State

Current Principal Place of Business:

PMB #319
13750 WEST COLONIAL DRIVE, SUITE 350
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

PMB #319
13750 WEST COLONIAL DRIVE, SUITE 350
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 34-2008227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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/MEMBERS:

Title: MGR () Delete
Name: GASKIN, GEOFFREY
Address: 17350 W. COLONIAL DR., #350, PMB #319
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGR () Delete
Name: BALZER, COREY
Address: 17350 W. COLONIAL DR., #350, PMB #319
City-St-Zip: WINTER GARDEN, FL 34787

Title: S (X) Delete
Name: KOPELMAN, RANDY
Address: 17350 W. COLONIAL DR., #350, PMB #319
City-St-Zip: WINTER GARDEN, FL 34787

Title: T (X) Delete
Name: BALZER, COREY
Address: 17350 W. COLONIAL DR., #350, PMB #319
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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 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: GEOFFREY GASKIN

MGRM

03/08/2005

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