

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000076361

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** MID SOUTH RANCHES, LLC

**Current Principal Place of Business:**

931 OAKLAND AVE  
OAKLAND, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 771399  
WINTER GARDEN, FL 34777

**New Mailing Address:**

**FEI Number:** 20-1786803

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEWIN, WILLIAM R  
12824 COUNTY ROAD 561 SOUTH  
CLERMONT, FL 34712 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: MGR  
Name: LEWIN, WILLIAM R  
Address: 12824 COUNTY RD  
City-St-Zip: CLERMONT, FL 34711

Title: MGR  
Name: CONOLEY, E B  
Address: 1754 TURNBERRY TERRACE  
City-St-Zip: ORLANDO, FL 32804

Title: MGR  
Name: PAFFRATH, KEVIN  
Address: 598 SHANNON RD  
City-St-Zip: ORLANDO, FL 32806

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: WILLIAM R LEWIN

MGR

04/05/2010

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