2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State 04-18-2008 90160 032 ***138.75

DOCU 1. Entity Nam WILSON				04-18	3-2008 9	90160 03	32 ***13	8.75			
Principal Plac	e of Busines	s ·	Mailing Address								
141 HALL ROAD			141 HALL ROAD						50	00400	\ -
LAKE PLACID, FL 33852			LAKE PLACID, FL 33852			50004865					
			The Market of the Control of the Con								
2. Principal Place of Business - No P.O. Box #			3. Mailing Address 1925 CR 29								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04152008	Chg-Li	LC	CR2E08	33 (12/06)		
City & State			City & State Lake Placid, FL			4. FEI Number 20-173				1 1	plied For
Zip	Zip Country		Zip 33852	Country	<i>y</i>		te of Status Desired			5.00 Add	litional
	G. Name	and Address of Current	Registered Agent		1	7. Name and	Address o	of New Re			•
	0504	- 1	الأراب المدارية	 Name 							
WILSON, CECIL A 141 HALL ROAD			Street A		ddress (F	dress (P.O. Box Number is Not Acceptable) 925 CR 29					
LAKE PLA		33852		1	1923	UK 29					
				Cited						7:- 0:-1	
						Placid			FL	Zip 3 3	
	named entitions of regis		r the purpose of changing its re	gistered office o	r registere	ed agent, or bot	h, in the St	ate of Flor	ida. I am ía سور غ	amiliar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable. (NOTE: F	 Registered Agent signal	ure required t	when reinstating)			<u>7-/5</u>	-08	<u></u>
FILE After May	NOW!!! 7 1, 2008	FEE IS \$138.75 Fee will be \$538.75	5			,			check pa Departme	yable to nt of State	
FILE After May	NOW!!! 1, 2008	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBE	<u> </u>	10.			ADC	Florida			
9.	MGR	Fee will be \$538.75	<u> </u>	TITLE	MGR	1 A Us		Florida	Departme		Addition
9. IIILE NAME	MGR WILSON,	Fee will be \$538.75 MANAGING MEMBE CECIL A	RS/MANAGERS		Ceci	1 A. Wi		Florida	Departme	nt of State	12.55
9.	MGR WILSON, 141 HALL	Fee will be \$538.75 MANAGING MEMBE CECIL A	RS/MANAGERS	TITLE NAME	Ceci 1925	1 A. Wi CR 29	lson	Florida DITIONS/C	Departme	nt of State	12.55
9. TITLE NAME STREET ADDRESS	MGR WILSON, 141 HALL	MANAGING MEMBER CECIL A . ROAD	RS/MANAGERS	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Ceci 1925	CR 29	lson	Florida DITIONS/C	Departme	nt of State	12.55
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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.

GNATURE: 4-15-0 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

15-08 863-699-1260

Daytune Phone #