


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 15, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000088159</b> 1. Entity Name <b>GREAT OUTDOORS OF HIGH SPRINGS, LLC</b>	
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Principal Place of Business <b>23335 NW CR 236 20 HIGH SPRINGS, FL 32643 US</b>	Mailing Address <b>P.O. BOX 1740 HIGH SPRINGS, FL 32655 US</b>
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**DO NOT WRITE IN THIS SPACE**



02112008No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>37-1502072</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent

**WELLBORN, WALTER H  
23008 NW 188TH STREET  
HIGH SPRINGS, FL 32643**

**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**

U000000229860  
02/26/08-80060-001 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WELLBORN, WALTER H P.O. BOX 1740 HIGH SPRINGS, FL 32655
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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:**  **2-13-08 386-454-1429**

SIGNATURE (AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE) Date Daytime Phone #

Walter H. Wellborn