

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

**FILED**  
**Mar 28, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000093297

1. Entity Name

WOODS & RIVER PROPERTIES, LLC



Principal Place of Business

2128 SW MAIN BLVD STE 103  
LAKE CITY FL 32025

Mailing Address

PO BOX 830  
LAKE CITY FL 32056



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-2322329

Applied For

No: Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

1st MOORE

CR2E083 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TURBEVILLE, RON W  
2128 SW MAIN BLVD STE 103  
LAKE CITY FL 32025

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent with the purpose(s)

(NOTE: Registered agent's signature required if changing name)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008, Fee Will Be \$538.75**  
**Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete  
NAME TURBEVILLE, RON W  
STREET ADDRESS PO BOX 430  
CITY-STATE-ZIP LAKE CITY FL 32056

TITLE ☐ Change ☐ Addition  
NAME 000000874556  
STREET ADDRESS 04/10/08-80123-008 143.75  
CITY-STATE-ZIP

TITLE MGRM ☐ Delete  
NAME HOOK, LAURA  
STREET ADDRESS 276 SW PINE FOREST COURT  
CITY-STATE-ZIP LAKE CITY FL 32024

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE MGR ☐ Delete  
NAME TURBEVILLE, ROBERT W  
STREET ADDRESS 174 NW VENICE GLEN  
CITY-STATE-ZIP LAKE CITY FL 32055

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE MGR ☐ Delete  
NAME CREWS, BRIAN  
STREET ADDRESS 2571 S MARION AVE  
CITY-STATE-ZIP LAKE CITY FL 32025

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Ron W. Turbeville*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/26/08 386-752-5035

Date Signature Phone #