## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 21, 2008 08:00 A Secretary of State DOCUMENT # L05000027785 . 1. Entity Name WAVERLY, LLC Principal Place of Business Mailing Address 750 MARKHAM WOODS 750 MARKHAM WOODS LONGWOOD, FL 32779 LONGWOOD, FL 32779 03242008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent BENITEZ, GUS ESQ DO NOT WRITE 1223 EAST CONCORD ST IN THIS SPACE ORLANDO, FL 32803 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 and title if applicable TIOOOQOOT CALOO 05/07/08-80020-018 138.75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9, MANAGING MEMBERS/MANAGERS TITLE MGR BENITEZ, ELIZABETH F NAME 750 MARKHAM WOODS STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32779 **TILLE** NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-St-Zip TITLE

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:

NAME STREET ADDRESS CITY-ST-ZIP