

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000035103

**FILED**  
**Feb 23, 2010**  
**Secretary of State**

**Entity Name:** WINDSWEPT ON LEMON BAY, L.L.C.

**Current Principal Place of Business:**

764 S. MCALL ROAD  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

75 KINGSTOWN ROAD  
% H. SIROIS  
WYOMING, RI 02898

**New Mailing Address:**

**FEI Number:** 54-2171643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLBURN, HARRY S JR.  
444 W. DEARBORN STREET  
ENGLEWOOD, FL 34223 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: MGRM  
Name: SIROIS, HERBERT J  
Address: 75 KINGSTOWN ROAD  
City-St-Zip: WYOMING, RI 02898

Title: MGRM  
Name: MASSIMI, PAMELA E  
Address: 2 ASHTON RD.  
City-St-Zip: KATONAH, NY 10536 US

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: PAMELA MASSIMI

MGRM

02/23/2010

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