

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036558

Entity Name: WINGATE VILLAGE, LLC

FILED
Apr 01, 2009
Secretary of State

Current Principal Place of Business:

9309 OLD KINGS RD SOUTH
1-A
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

9309 OLD KINGS RD SOUTH
1-A
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 20-2690190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENCHERO, GLORIA
9309 OLD KINGS RD SOUTH 1-A
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

MENCHERO, GLORIA
9309 OLD KINGS RD SOUTH
1-A
JACKSONVILLE, FL 32257 US

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: GLORIA MENCHERO

04/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MPST () Delete
Name: EDMONDS, DANA
Address: 9309-1A OLD KINGS ROAD SOUTH
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: MV (X) Delete
Name: CUTTS, WILLIAM
Address: 9309-1A OLD KINGS ROAD SOUTH
City-St-Zip: JACKSONVILLE, FL 32257 US

ADDITIONS/CHANGES:

Title: MPST (X) Change () Addition
Name: EDMONDS, DANA H
Address: 9309-1A OLD KINGS ROAD SOUTH
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DANA H EDMONDS

MPST

04/01/2009

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