

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000055029

Entity Name: WINNIE-BAGO, LLC

FILED  
Apr 01, 2009  
Secretary of State

## Current Principal Place of Business:

3520 NW 43RD ST.  
GAINESVILLE, FL 32608

## New Principal Place of Business:

4400 NW 23RD AVE  
GAINESVILLE, FL 32606

## Current Mailing Address:

3520 NW 43RD ST.  
GAINESVILLE, FL 32608

## New Mailing Address:

4400 NW 23RD AVE  
GAINESVILLE, FL 32606

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINNIE, JOHN S ESQ  
3520 NW 43RD ST.  
GAINESVILLE, FL 32608 US

## Name and Address of New Registered Agent:

WINNIE, JOHN S ESQ  
4400 NW 23RD AVE.  
SUITE  
GAINESVILLE, FL 32606 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:

04/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: WINNIE, JOHN S ESQ  
Address: 3520 NW 43RD ST.  
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM ( ) Delete  
Name: ROLLIE, SELBY  
Address: 3450 PENROSE PRL STE 160  
City-St-Zip: BOULDER, CO 80301

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WINNIE, JOHN S ESQ  
Address: 3011 SW 70TH LANE  
City-St-Zip: GAINESVILLE, FL 32608

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: JOHN S. WINNIE

MM

04/01/2009

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