

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062629

FILED  
Apr 29, 2008  
Secretary of State

**Entity Name:** WOODSIDE ROCKING HORSE, LLC

**Current Principal Place of Business:**

2541 METRO CENTRE BLVD.  
SUITE 1  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

39 EAST EAGLERIDGE DRIVE  
SUITE 102  
NORTH SALT LAKE, UT 84054

**New Mailing Address:**

**FEI Number:** 86-0890979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARACORP INCORPORATED  
236 EAST 6TH AVENUE  
TALLAHASSEE, FL 32303 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: MGR ( ) Delete  
Name: HANDLER, WILLIAM  
Address: 2541 METRO CENTRE BLVD., SUITE 1  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: MGR ( ) Delete  
Name: NELSON, SCOTT  
Address: 39 EAST EAGLERIDGE DRIVE, SUITE 102  
City-St-Zip: NORTH SALT LAKE, UT 84054

**ADDITIONS/CHANGES:**

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

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:** SCOTT NELSON

MGR

04/29/2008

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