

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071983

FILED
Apr 27, 2009
Secretary of State

Entity Name: LIGHTWOOD LLC

Current Principal Place of Business:

11064 KEENE STREET
SPRINGHILL, FL 34608 US

New Principal Place of Business:

8 MACAW LANE
KEY WEST, FL 33040 US

Current Mailing Address:

11064 KEENE STREET
SPRINGHILL, FL 34608 US

New Mailing Address:

8 MACAW LANE
KEY WEST, FL 33040 US

FEI Number: 20-5302181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECK, WILLIAM V JR.
11064 KEENE STREET
SPRINGHILL, FL 34608 US

Name and Address of New Registered Agent:

BECK, WILLIAM V JR.
8 MACAW LANE
KEY WEST, FL 33040 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:

04/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BECK, WILLIAM V JR.
Address: 11064 KEENE STREET
City-St-Zip: SPRINGHILL, FL 34608 US

Title: MGR () Delete
Name: MINORE, ANTHONY
Address: 11064 KEENE STREET
City-St-Zip: SPRINGHILL, FL 34608 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BECK, WILLIAM V JR.
Address: 8 MACAW LANE
City-St-Zip: KEY WEST, FL 33040 US

Title: MGR (X) Change () Addition
Name: MINORE, ANTHONY
Address: 8 MACAW LANE
City-St-Zip: KEY WEST, FL 33040 US

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: WILLIAM V BECK, JR

MGR

04/27/2009

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