

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000076177

FILED  
Jun 15, 2009  
Secretary of State

Entity Name: WINDY RIDGE, LLC

**Current Principal Place of Business:**

15601 QUEENSFERRY DRIVE  
FT. MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

15601 QUEENSFERRY DRIVE  
FT. MYERS, FL 33912

**New Mailing Address:**

FEI Number: 20-3257806      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

BRENNAN, MANNA & DIAMOND, P.L.  
76 SOUTH LAURA STREET, SUITE 2110  
JACKSONVILLE, FL 32202      US

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

HOFFMAN, VALARIE  
15601 QUEENSFERRY DRIVE  
FORT MYERS, FL 33912      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: VALARIE HOFFMAN

06/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: HOFFMAN, ELIOT B  
Address: 15601 QUEENSFERRY DRIVE  
City-St-Zip: FT. MYERS, FL 33912

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

Title: MGR      ( ) Change (X) Addition  
Name: HOFFMAN, VALARIE  
Address: 15601 QUEENSFERRY DRIVE  
City-St-Zip: FORT MYERS, FL 33912

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: VALARIE HOFFMAN

MGR

06/15/2009

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