

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077819

Entity Name: WILDWOOD PARTNERS, LLC

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

185 NORTH BAYSHORE DRIVE
EASTPOINT, FL 32328

New Principal Place of Business:

183 NORTH BAYSHORE DRIVE
EASTPOINT, FL 32328

Current Mailing Address:

185 NORTH BAYSHORE DRIVE
EASTPOINT, FL 32328

New Mailing Address:

183 NORTH BAYSHORE DRIVE
EASTPOINT, FL 32328

FEI Number: 20-3293607 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:

MILLENDER, BRUCE
185 NORTH BAYSHORE DRIVE
EASTPOINT, FL FL US

Name and Address of New Registered Agent:

MILLENDER, BRUCE
183 NORTH BAYSHORE DRIVE
EASTPOINT, FL FL 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:

05/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MILLENDER, BRUCE
Address: 185 NORTH BAYSHORE DRIVE
City-St-Zip: EASTPOINT, FL 32328 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILLENDER, BRUCE
Address: 183 NORTH BAYSHORE DRIVE
City-St-Zip: EASTPOINT, FL 32328 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: BRUCE MILLENDER

MGRM

05/05/2008

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