


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000093799 1. Entity Name MAGNOLIA PLAZA, L.L.C.	
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Principal Place of Business 5013 EDGEWATER DRIVE ORLANDO, FL 32810 US	Mailing Address 5013 EDGEWATER DRIVE ORLANDO, FL 32810 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WEATHERFORD, WILLIAM P JR. 1150 LOUISIANA AVENUE SUITE 4 WINTER PARK, FL 32789

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008** In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR EFFRON, LOUIS R 5013 EDGEWATER DRIVE ORLANDO, FL 32810
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **7/10/08** **407-3257-4927**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

FILED
Jul 16, 2008 08:00 AM
Secretary of State



07102008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3514324	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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07/16/08-80001-025 143.75