

# **2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000093824

**FILED**  
**Jun 12, 2007**  
**Secretary of State**

**Entity Name:** WINDSONG REAL ESTATE COMPANY, LLC

**Current Principal Place of Business:**

1880 EAGLE HARBOR PARKWAY  
ORANGE PARK, FL 32003 US

**New Principal Place of Business:**

**Current Mailing Address:**

1880 EAGLE HARBOR PARKWAY  
ORANGE PARK, FL 32003 US

**New Mailing Address:**

**FEI Number:** 06-1765458

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEEN, ALLAN E  
1031 W. MORSE BLVD., SUITE 325  
WINTER PARK, FL 32789 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: EAST WEST (GMS) MANA, GEMENT CORPORA T ION  
Address: 1880 EAGLE HARBOR PARKWAY  
City-St-Zip: ORANGE PARK, FL 32003 US

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

**ADDITIONS/CHANGES:**

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

Title: VP ( ) Change (X) Addition  
Name: DUBIS, BEVERLY  
Address: 2331 LAKESHORE DRIVE N  
City-St-Zip: ORANGE PARK, FL 32003 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:** BY: ROGER S. ARROWSMITH

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06/12/2007

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