


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2008 8:00 am**  
**Secretary of State**

02-28-2008 90107 012 \*\*\*138.75

<b>DOCUMENT # L05000115824</b> 1. Entity Name WRIGHT CONCEPTS, LLC	
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Principal Place of Business 7803 SOUTHLAND BLVD 203 ORLANDO, FL 32807	Mailing Address 7803 SOUTHLAND BLVD 203 ORLANDO, FL 32809
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01212008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-3870541	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  HUTCHINS, ROBERT J 1515 INTERNATIONAL PARKWAY SUITE 2001 LAKE MARY, FL 32746	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WP WRIGHT, BRANNON 368 HAMMOCK DUNES PLACE ORLANDO, FL 32828
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KUYKENDALL, CHERYL R 707 IRONWOOD CRT ORLANDO, FL 32708
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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:** *Cheryl Kuykendall*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

*2/6/08* *407-850-0708*