

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000123627

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: CARROLLWOOD HOLDINGS, LLC

**Current Principal Place of Business:**

1327 LAKE MIRROR TERRACE NW  
WINTER HAVEN, FL 33881

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 811  
WINTER HAVEN, FL 33882 US

**New Mailing Address:**

FEI Number: 54-2192232

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, CHARLES C III  
1327 LAKE MIRROR TERRACE NW  
WINTER HAVEN, FL 33881 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: SMITH, CHARLES C III  
Address: P.O. BOX 811  
City-St-Zip: WINTER HAVEN, FL 33882 US

Title: MGR ( ) Delete  
Name: SIMONDS, JOSEPH L  
Address: 306 LAKEBRIDGE CROSSING  
City-St-Zip: CANTON, GA 30114

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: SIMONDS, JOSEPH L  
Address: 390 17TH ST. NW UNIT 2061  
City-St-Zip: ATLANTA, GA 30363

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: CHARLES C. SMITH

MGR

01/08/2008

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