


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000022994 1. Entity Name IONE M. WICKHAM FAMILY LLC	
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Principal Place of Business 14396-B SOUTH OAKVIEW AVENUE FLORAL CITY, FL 34436 US	Mailing Address 14396-B SOUTH OAKVIEW AVENUE FLORAL CITY, FL 34436 US
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01032008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4415327	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHN H. RAINS III, P.A.
501 EAST KENNEDY BOULEVARD
SUITE 750
TAMPA, FL 33602

**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 _____
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	MGR WICKHAM, HARRY 14396-B SOUTH OAKVIEW AVENUE FLORAL CITY, FL 34436
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WICKHAM, IONE 14396-B SOUTH OAKVIEW AVENUE FLORAL CITY, FL 34436
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01/11/08-80017-017 138.75

**DO NOT WRITE
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: Harry Wickham 1-4-08 352-560-0320
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

HARRY WICKHAM