

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 19, 2007 8:00 am
Secretary of State

03-30-2007 90039 039 ****50.00

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DOCUMENT # L06000048702 1. Entity Name 100 W. WOODLAND, LLC																																									
Principal Place of Business 29922 STATE ROAD 46 SORRENTO FL 32776			Mailing Address 29922 STATE ROAD 46 SORRENTO FL 32776																																						
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																							
City & State		City & State		4. FEI Number Applied For <input checked="" type="checkbox"/> Not Applicable																																					
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required																																					
6. Name and Address of Current Registered Agent <div style="border: 1px solid black; padding: 5px; display: inline-block;"> DAY JAY, BRENDA J 29922 STATE ROAD 46 SORRENTO FL 32776 </div>				7. Name and Address of New Registered Agent Name DAY, BRENDA J. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																					
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 re-registering) DATE _____																																									
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007																																									
9. MANAGING MEMBERS/MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%; padding: 2px;"> MGR DAY, BRENDA J 29922 STATE ROAD 46 SORRENTO FL 32776 </td> <td style="width: 10%; text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DAY, BRENDA J 29922 STATE ROAD 46 SORRENTO FL 32776	<input type="checkbox"/> Delete																10. ADDITIONS / CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 2px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%; padding: 2px;"></td> <td style="width: 10%; text-align: right; padding: 2px;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td><td></td></tr> </table>			TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition															
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <div style="float: right; text-align: right;"> Date _____ Daytime Phone # _____ </div>																																									