

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000052441

FILED  
Feb 01, 2008  
Secretary of State

Entity Name: DWIN HOLDING GROUP, LLC

## Current Principal Place of Business:

2898 MAHAN DRIVE  
SUITE 4  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

2898 MAHAN DRIVE  
SUITE 4  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 20-4927152

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINOKUR, THOMAS D  
2898 MAHAN DRIVE  
SUITE 4  
TALLAHASSEE, FL 32308 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: MGRM ( ) Delete  
Name: PARSONS WINOKUR, KRISTIN  
Address: 6552 SPICEWOOD LANE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete  
Name: WINOKUR, THOMAS D  
Address: 6552 SPICEWOOD LANE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Delete  
Name: PARSONS, C. DARREN  
Address: 110 HOFFMAN DR.  
City-St-Zip: TALLAHASSEE, FL 32312

## ADDITIONS/CHANGES:

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

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

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

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: KRISTIN PARSONS WINOKUR

MGRM

02/01/2008

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