

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054606

Entity Name: SOUTH WIND 99, LLC

FILED
Jan 18, 2008
Secretary of State

Current Principal Place of Business:

4505 PARK BLVD., STE 6
PINELLAS PARK, FL 33781

New Principal Place of Business:

7850 ULMERTON ROAD
7B
LARGO, FL 33771 US

Current Mailing Address:

4505 PARK BLVD., STE 6
PINELLAS PARK, FL 33781

New Mailing Address:

7850 ULMERTON ROAD
7B
LARGO, FL 33771 US

FEI Number: 20-4967838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TO, BRUCE
4505 PARK BLVD., STE 6
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

TO, BRUCE
7850 ULMERTON ROAD
7B
LARGO, FL 33771 US

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: BRUCE TO

01/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TO, BRUCE
Address: 4505 PARK BLVD., STE 6
City-St-Zip: PINELLAS PARK, FL 33781

Title: MGRM () Delete
Name: NGUYEN, BE
Address: 4505 PARK BLVD., STE 6
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TO, BRUCE
Address: 7850 ULMERTON ROAD, SUITE 7B
City-St-Zip: LARGO, FL 33771

Title: MGR (X) Change () Addition
Name: NGUYEN, LAN
Address: 7850 ULMERTON ROAD, SUITE 7B
City-St-Zip: LARGO, FL 33771

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: BRUCE TO

MGRM

01/18/2008

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