2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000058452

1. Entity Name WIGSHAW, LLC



Principal Place of Business

14024 NW US HIGHWAY 441 Alachua, FL 32615 Mailing Address

PO BOX 1857 ALACHUA, FL 32616

FILED Apr 04, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

01282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 56-2591111

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PEELE, S. AUSTIN 285 NE HERNANDO AVE LAKE CITY, FL 32055

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	pations of registered agent.	anging its registered bride or registered agent, or both, in the S	late of Florida. I am familiar with, and accept
SIGNATUR	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	LE NOWIII FEE IS \$138.75 ay 1, 2008 Fee will be \$538.75		
0	MANAGING MEMBERS/MANAGERS		· · · · · · · · · · · · · · · · · · ·

ITILE MR.

NAME WIGGINS, JOSEPH J

STREET ADDRESS PO BOX 1857

CITY-ST-ZIP ALACHUA, FL 32616

U00000881361 04/15/08-80098-009 138.7\$

CITY-ST-ZIP ALACHUA, FL 32616

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 justee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Joseph A Wiggins

4/1/08

386-418.4000

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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