2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L06000060451

1. Entity Name



FILED Jun 02, 2008 8:00 am Secretary of State 06-02-2008 90258 008 ***138.75

ON THE WIND, LLC									
Principal Place of Business 696 BEAR CREEK COURT WINTER SPRINGS, FL 32708 US		Mailing Address 696 BEAR CREEK COURT WINTER SPRINGS, FL 32708 US							
A D	No BO Book	D. Maliforn Address							
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						.	.001 [1] 1001
Suite, Apt. #, etc.		Suite, Apt. #, etc.			05212008	Chg-LLC	CR2E0	83 (12/06)	
City & State		City & State			4. FEI Numb			 	plied For at Applicable
Zip	Country	Zip	Country		5. Certificate	e of Status Desir	ed 🔲	\$5.00 Add Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name an	d Address of No	w Registered		
DEOVED	IAODED D	Name							
	JASPER B CREEK COURT PRINGS, FL 32708	Street Address			(P.O. Box Number is Not Acceptable)				
***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
			City				FL	Zip Code	э
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 a	and title if applicable. (NOTE; F	Registered Agent signa	iture required	(when reinstating)		DATE		
	E NOW!!! FEE IS \$138.75 by September 12, 2008	In accordance with s. 607.193(2)(b), F.S., t liability company did not receive the prior n				i e	Make check p orida Departm	-	.
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIO	ONS/CHANGES		
TITLE	MGRM	☐ Delete	TITLE					Change	☐ Addition
NAME STREET ADDRESS	BECKER, MARILYN K 696 BEAR CREEK COURT		NAME Street Address						
CITY-ST-ZIP	WINTER SPRINGS, FL 32708		CITY-ST-ZIP						
TITLE	MGRM	☐ Delete	TITLE					☐ Change	Addition
NAME	BECKER, JASPER B		NAME						
STREET ADDRESS City-S1-ZIP	696 BEAR CREEK COURT WINTER SPRINGS, FL 32708		STREET ADDRESS CITY-ST-ZIP	1					
TITLE	MGRM	☐ Delete	TITLE	MG	M	,		Change	Addition
NAME	FUITA, SHERALEE		NAME	Fui	th, She	alec.			
STREET ADDRESS CITY-ST-ZIP	5444 FERROL DR WINTER PARK, FL 32792		STREET ADDRESS CITY-ST-ZIP	W.	ter Par	Priva K. FL 3	2712		
TITLE		☐ Delete	TITLE	1	1) 0 1 41	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u>-</u>	☐ Change	Addition
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE			· · ·		☐ Change	Addition
NAME		La belete	NAME						
STREET ADDRESS	r:		STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZiP						- Addition
TITLE NAMÉ		☐ Delete	TITLE NAME					☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS						
CITY-\$T-ZIP			CITY-ST-ZIP						
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.									