

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000084508

Entity Name: MIDWAY TOWN CENTER, LLC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

3628 SE 18TH AVENUE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

3628 SE 18TH AVENUE
OCALA, FL 34471

New Mailing Address:

FEI Number: 20-5456299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, BRIAN D ESQ.
1028 LAKE SUMTER LANDING
THE VILLAGES, FL 32162 US

Name and Address of New Registered Agent:

HILLS, RONALD D MGR
3628 SE 18 TH AVE
OCALA, FL 34471 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: RONALD D. HILLS

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HILLS LAND TRUST INC,
Address: 3628 SE 18TH AVENUE
City-St-Zip: OCALA, FL 34471

Title: MGR () Delete
Name: WINDSOR FIELDS, LLC,
Address: 190 OAK STREET
City-St-Zip: MEDFORD, NY 11763

Title: MGR () Delete
Name: LUZ SILDARRIAGA EURI, BE FAMILY TRUS T
Address: 2408 SE 22ND PLACE
City-St-Zip: OCALA, FL 34471

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: RONALD D HILLS

MGR

03/23/2009

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