

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085493

FILED  
Jul 11, 2008  
Secretary of State

Entity Name: ORLANDO WILLOW BEND, LLC

**Current Principal Place of Business:**

3844 HIBISCUS STREET  
WESTON, FL 33332

**New Principal Place of Business:**

8445 SPRINGTREE DRIVE  
SUNRISE, FL 33351

**Current Mailing Address:**

3844 HIBISCUS STREET  
WESTON, FL 33332

**New Mailing Address:**

8445 SPRINGTREE DRIVE  
SUNRISE, FL 33351

FEI Number: 20-5625275      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CLARK, THOMAS M  
2400 EAST COMMERCIAL BLVD., STE. 820  
FORT LAUDERDALE, FL 33308      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: MGR      ( ) Delete  
Name: ARDELEAN, CONSTANTIN  
Address: 3844 HIBISCUS STREET  
City-St-Zip: WESTON, FL 33332

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: ARDELEAN, CONSTANTIN  
Address: 8445 SPRINGTREE DRIVE  
City-St-Zip: SUNRISE, FL 33351

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: CONSTANTIN ARDELEAN

MGR

07/11/2008

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