2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

Jan 14, 2008 08:00 AM **DOCUMENT # L06000094923** Secretary of State 1. Entity Name WINE-OH!, L.L.C. Principal Place of Business Mailing Address 220 N. ATLANTIC AVENUE 220 N. ATLANTIC AVENUE COCOA BEACH, FL 32931 COCOA BEACH, FL 32931 01102008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 20-5623398 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCNEAL, MARY B DO NOT WRITE 2301 TIMBERLINE DRIVE MELBOURNE, FL 32934 IN THIS SPACE 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) U00000783027 FILE NOWIII FEE IS \$138.75 01/15/08-80099-003 138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. **MGRM** TITI F MCNEAL, MARY B NAME STREET ADDRESS 2301 TIMBERLINE DRIVE MELBOURNE, FL 32934 CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

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.

FILED