

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000095871

Entity Name: W & B HOLDING, LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1085 WEST MORSE BOULEVARD
A
WINTER PARK, FL 32789

Current Mailing Address:

1085 WEST MORSE BOULEVARD
A
WINTER PARK, FL 32789

New Principal Place of Business:

1085 WEST MORSE BOULEVARD
SUITE A
WINTER PARK, FL 32789

New Mailing Address:

1085 WEST MORSE BOULEVARD
SUITE A
WINTER PARK, FL 32789

FEI Number: 20-5632643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LARRY W
1085 WEST MORSE BOULEVARD
A
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

WILLIAMS, LARRY W
1085 WEST MORSE BOULEVARD
SUITE A
WINTER PARK, FL 32789 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:

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BARRETT, WILLIAM E
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: WILLIAMS, LARRY W
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: L.W. WILLIAMS CORPOR, ATION
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: WINDSWEEP J.D.I. INC, .
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: M.W. BARRETT HOLDING, CORPORATION
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: CORA HOLDING CORPORA, TION
Address: 1085 WEST MORSE BOULEVARD, SUITE A
City-St-Zip: WINTER PARK, FL 32789

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:

Title: () Change () Addition
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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: LARRY W. WILLIAMS

MGR

04/30/2008

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