

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105104

FILED
Feb 18, 2008
Secretary of State

Entity Name: WILD WOOD HOMES & LIFESTYLES, LLC

Current Principal Place of Business:

C/O JIM STONE
601 29TH ST
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 541032
ORLANDO, FL 32854

New Mailing Address:

FEI Number: 20-5775931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORD, VALERIE L
C/O ROSE, SUNDSTROM & BENTLEY, LLP
2180 WEST STATE ROAD 434, SUITE 2118
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

WINEBRENNER, LUKE B
1814 FAIRVIEW SHORES DR
ORLANDO, FL 32804 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: LUKE WINENBRENNER

02/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WINEBRENNER, LUKE
Address: P.O. BOX 541032
City-St-Zip: ORLANDO, FL 32854

Title: MGR () Delete
Name: STONE, JIM
Address: 601 29TH ST
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WINEBRENNER, LUKE B
Address: P.O. BOX 541032
City-St-Zip: ORLANDO, FL 32854

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: LUKE B WINEBRENNER

MGRM

02/18/2008

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