

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105104

FILED  
Apr 20, 2009  
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:**

4101 FAIRVIEW VISTA POINT  
#128  
ORLANDO, FL 32804

**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:**

WINEBRENNER, LUKE B  
1814 FAIRVIEW SHORES DR  
ORLANDO, FL 32804 US

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

WINEBRENNER, LUKE B  
4101 FAIRVIEW VISTA POINT  
128  
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 WINEBRENNER

04/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

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

**ADDITIONS/CHANGES:**

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: LUKE WINEBRENNER

MGR

04/20/2009

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