

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110187

Entity Name: LO WOOD, LLC

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

347 COMFORT DRIVE
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

347 COMFORT DRIVE
APOPKA, FL 32712

New Mailing Address:

543 WEST 14 STREET
APOPKA, FL 32703

FEI Number: 76-0841992 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:

WOOD, LORENZA L
347 COMFORT DRIVE
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

WOOD, LORENZA L
543 WEST 14 STREET
APOPKA, FL 32703 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:

05/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WOOD, LORENZA L
Address: 347 COMFORT DRIVE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WOOD, LORENZA L
Address: 543 WEST 14 STREET
City-St-Zip: APOPKA, FL 32703

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: LORENZA L. WOOD

MGR

05/02/2007

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