

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006475

FILED
Feb 23, 2007
Secretary of State

Entity Name: TRADEWINDS HOMOSASSA FINANCE, LLC

Current Principal Place of Business:

4450 E. WINDMILL DRIVE APARTMENT #107
INVERNESS, FL 34453

New Principal Place of Business:

Current Mailing Address:

4450 E. WINDMILL DRIVE APARTMENT #107
INVERNESS, FL 34453

New Mailing Address:

FEI Number: 20-5415301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDIFORT, JAN-ERNST
4450 E. WINDMILL DRIVE APARTMENT #107
INVERNESS, FL 34453 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SANDIFORT, JAN-ERNST
Address: 4450 E. WINDMILL DRIVE APARTMENT #107
City-St-Zip: INVERNESS, FL 34453

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: IVANOV, SIMONA
Address: 4450 E. WINDMILL DRIVE APT #107
City-St-Zip: INVERNESS, FL 34453

I hereby certify that the information supplied with this filing does not qualify for the 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: JAN-ERNST SANDIFORT

MGR

02/23/2007

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