

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000017016

Entity Name: WILLA VISTA TRAIL, LLC

**FILED**  
**Apr 09, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

300 NORTH MAITLAND AVE.  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

300 NORTH MAITLAND AVE.  
MAITLAND, FL 32751

**New Mailing Address:**

FEI Number: 20-8538043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

INDRANI, PARSAUD S  
300 NORTH MAITLAND AVENUE  
MAITLAND, FL 32751 US

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

KOLTUN, JEFFREY M  
577 N WYMORE RD  
SUITE 100  
MAITLAND, FL 32751 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: JEFFREY M KOLTUN

04/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GARFINKEL, FRANCINE L  
Address: 300 NORTH MAITLAND AVE.  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES:**

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: FRANCINE M GARFINKEL

MGRM

04/09/2009

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