

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058037

FILED
Feb 01, 2009
Secretary of State

Entity Name: WIND AND SPIRIT PHOTOGRAPHY, LLC.

Current Principal Place of Business:

1029 CREEKS BEND DRIVE
CASSELBERRY, FL 32707

New Principal Place of Business:

3421 COMMERCE AVENUE
DELTONA, FL 32738

Current Mailing Address:

1029 CREEKS BEND DRIVE
CASSELBERRY, FL 32707

New Mailing Address:

3421 COMMERCE AVENUE
DELTONA, FL 32738

FEI Number: 26-0270261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OVERTON, JOHN E
1029 CREEKS BEND DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

OVERTON, JOHN E
3421 COMMERCE AVENUE
DELTONA, FL 32738 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:

02/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OVERTON, JOHN E
Address: 1029 CREEKS BEND DRIVE
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGR () Delete
Name: ROSS, ALLISON
Address: 3421 COMMERCE AVE
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OVERTON, JOHN E
Address: 3421 COMMERCE AVENUE
City-St-Zip: DELTONA, FL 32738 US

Title: MGR (X) Change () Addition
Name: ROSS, OVERTON
Address: 3421 COMMERCE AVE
City-St-Zip: DELTONA, FL 32738

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: JOHN E. OVERTON

MGRM

02/01/2009

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