


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90104 048 ***138.75

DOCUMENT # L07000068709	
1. Entity Name WINDERMERE GATEWAY, LLC	

Principal Place of Business 13100 WEST COLONIAL DRIVE WINTER GARDEN, FL 34787-3953	Mailing Address PO BOX 770388 WINTER GARDEN, FL 34777-0338
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50003077



2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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04102008 Chg-LLC CR2E083 (12/06)

City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-0623383	Applied For Not Applicable
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6. Name and Address of Current Registered Agent MCPHERSON, REX V II 13100 WEST COLONIAL DRIVE WINTER GARDEN, FL 34787-3953	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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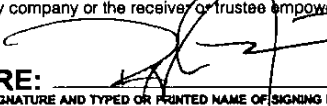
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR McPHERSON, REX V. II 13100 W COLONIAL DRIVE WINTER GARDEN, FL 34787-3953 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **Rex V. McPherson, II** **04/10/08** **(407) 656-2291**