

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104883

Entity Name: WINE TRAVELER LLC

FILED  
Mar 06, 2008  
Secretary of State

**Current Principal Place of Business:**

876 OLEANDER STREET  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

876 OLEANDER STREET  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 37-1554806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIDEON, DAVID H  
876 OLEANDER STREET  
BOCA RATON, FL 33486 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: MGRM ( ) Delete  
Name: GIDEON, DAVID H  
Address: 876 OLEANDER STREET  
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM ( ) Delete  
Name: GIDEON, ANNE C  
Address: 8369 VIA LEONESSA  
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM ( ) Delete  
Name: GIDEON, DARREN F  
Address: 1300 SOUTHWEST 15TH AVE.  
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM ( ) Delete  
Name: GIDEON, BEVERLY B  
Address: 876 OLEANDER STREET  
City-St-Zip: BOCA RATON, FL 33486

**ADDITIONS/CHANGES:**

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

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

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

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: DAVID H GIDEON

MGRM

03/06/2008

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