

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000113508

FILED
Aug 11, 2008
Secretary of State

Entity Name: WINDERMERE MITIGATION GROUP LLC

Current Principal Place of Business:

430 MAIN ST
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

430 MAIN ST
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 26-1384613 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RCM TAX SERVICES INC
1035 S DILLARD ST
WINDERMERE, FL 34786 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MRGM () Delete
Name: HARDING, RICHARD
Address: 2537 NOBLEMAN CT
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: WILLIAMS, LOREN R
Address: 8407 ISLAND PALM CIR
City-St-Zip: ORLANDO, FL 32835

Title: MGRM () Delete
Name: MORSE, KIMBERLY
Address: 9512 CROWN PRINCE LANE
City-St-Zip: WINDERMERE, FL 34786

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:

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: RICHARD HARDING

PRES

08/11/2008

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