2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117139

Entity Name: WIN ENTERPRISES LLC

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

215 CELEBRATION PLACE, STE. 500 1420 CELEBRATION BLVD, STE. 200

KISSIMMEE, FL 34747 CELEBRATION, FL 34747

Current Mailing Address: New Mailing Address:

215 CELEBRATION PLACE, STE. 500 1420 CELEBRATION BLVD, STE. 200

KISSIMMEE, FL 34747 CELEBRATION, FL 34747

FEI Number: 26-1525166 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HONEYCUTT, JOHN 786 OAK SHADOWS ROAD CELEBRATION, FL 34747 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: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HONEYCUTT, JOHN L III
 Name:

 Address:
 786 OAK SHADOWS ROAD
 Address:

 City-St-Zip:
 CELEBRATION, FL 34747
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 HONEYCUTT, CATHERINE
 Name:

 Address:
 786 OAK SHADOWS ROAD
 Address:

 City-St-Zip:
 CELEBRATION, FL 34747
 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: JOHN HONEYCUTT MGRM 04/16/2008