2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000008094

Entity Name: 209 WINDWARD, LLC

City-St-Zip:

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 318 ROSBLING ROAD SOUTH 318 ROEBLING ROAD SOUTH BELLEAIR, FL 33756 BELLEAIR, FL 33756 **Current Mailing Address: New Mailing Address:** 318 ROSBLING ROAD SOUTH 318 ROEBLING ROAD SOUTH BELLEAIR, FL 33756 BELLEAIR, FL 33756 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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: BLAKE, JENNIFER J BLAKE, JENNIFER J 318 RÓEBLING ROAD SOUTH 318 RÓSBLING ROAD SOUTH BELLEAIR, FL 33756 BELLEAIR, FL 33756 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: 05/01/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: () Delete Title: () Change (X) Addition WARHURST BLAKE IRREV TRUST DTD 11/24/04 Name: Name: Address: Address: 209 WINDWARD PASSAGE City-St-Zip: City-St-Zip: CLEARWATER, FL 33767 Title: Title: () Change (X) Addition () Delete Name: Name: J. JEANINE W. BLAKE FAMILY TRUST Address: Address: 318 ROEBLING ROAD SOUTH

City-St-Zip:

BELLEAIR, FL 33756

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: PETER S. WARHURST, TRUSTEE MGRM