2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000046184

Entity Name: WINDCREST-STONEYBROOK HILLS, LLC

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

605 E. ROBINSON STREET, STE 340 605 E. ROBINSON STREET

ORLANDO, FL 32801 SUITE 340

ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

605 E. ROBINSON STREET, STE 340 605 E. ROBINSON STREET ORLANDO, FL 32801 SUITE 340

ORLANDO, FL 32801

FEI Number: 26-2578752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BUCHANA, CRAIG L

BUCHANAN, CRAIG L MGR

605 E. ROBINSON STREET, STE 340

605 E. ROBINSON STREET

ORLANDO, FL 32801 US SUITE 340
ORLANDO, FL 32801 US ORLANDO, FL 32801 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: CRAIG L. BUCHANAN 02/16/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: BUCHANAN, CRAIG L MGR
Address: Address: 605 E, ROBINSON STREET, SUITE 340

City-St-Zip: City-St-Zip: ORLANDO, FL 32806

Title: () Delete Title: MGR () Change (X) Addition

Name: Name: MURRAY, THOMAS J MGR

Address: Address: 605 E. ROBINSON STREET, SUITE 340

City-St-Zip: City-St-Zip: ORLANDO, FL 32801

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: THOMAS J. MURRAY MGR 02/16/2009