

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000047425

**FILED**  
**Jan 17, 2009**  
**Secretary of State**

**Entity Name:** WIBERT SOUTH EDGEWOOD COMPLEX, LLC

**Current Principal Place of Business:**

2050 S. EDGEWOOD DR.  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

2045 E. EDGEWOOD DR.  
LAKELAND, FL 33803

**New Mailing Address:**

**FEI Number:** 26-2614874      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WIBERT, ERIC L  
2045 E. EDGEWOOD DR.  
LAKELAND, FL 33803      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: MGR ( ) Delete  
Name: WIBERT, ERIC L  
Address: 2045 E. EDGEWOOD DR.  
City-St-Zip: LAKELAND, FL 33803

Title: MGRM ( ) Delete  
Name: WIBERT, LEE M  
Address: 7275 YARBOROUGH LN  
City-St-Zip: LAKELAND, FL 33813

**ADDITIONS/CHANGES:**

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: ERIC WIBERT

MGR

01/17/2009

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