

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000096003

**FILED  
Feb 24, 2010  
Secretary of State**

**Entity Name:** SOUTHWIND ENTERPRISES OF ORMOND BEACH, LLC

**Current Principal Place of Business:**

93 PINECREST AVE.  
ORMOND BEACH, FL 33176

**New Principal Place of Business:**

6836 LINFORD LANE  
JACKSONVILLE, FL 32217

**Current Mailing Address:**

93 PINECREST AVE.  
ORMOND BEACH, FL 33176

**New Mailing Address:**

6836 LINFORD LANE  
JACKSONVILLE, FL 32217

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

MCGRANE, THAO  
93 PINECREST AVE.  
ORMOND BEACH, FL 33176 US

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

MCGRANE, THAO  
6836 LINFORD LANE  
JACKSONVILLE, FL 32217 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: THAO MCGRANE

02/24/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MCGRANE, THAO  
Address: 6836 LINFORD LANE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM  
Name: MCGRANE, EUGENE W JR.  
Address: 6836 LINFORD LANE  
City-St-Zip: JACKSONVILLE, FL 32217

I hereby 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: THAO MCGRANE

MGRM

02/24/2010

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