

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000111083

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** WIND MITIGATIONS OF WEST FLORIDA, LLC.

**Current Principal Place of Business:**

806 6TH STREET WEST  
PALMETTO, FL 34221 US

**New Principal Place of Business:**

**Current Mailing Address:**

806 6TH STREET WEST  
PALMETTO, FL 34221 US

**New Mailing Address:**

**FEI Number:** 26-3829078

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 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: MGRM  
Name: JOHNSON, MICHAEL D  
Address: 1300 4TH STREET WEST  
City-St-Zip: PALMETTO, FL 34221 US

Title: MGRM  
Name: LEE, STEPHEN S  
Address: 9202 36TH AVE E  
City-St-Zip: PALMETTO, FL 34221 US

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: MICHAEL D. JOHNSON

MGRM

04/27/2010

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