

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000006339

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: WILLOWBERRY INVESTMENTS, L.C.

**Current Principal Place of Business:**

8569 SE WOODWIND ST  
HOBE SOUND, FL

**New Principal Place of Business:**

8569 SE WOODWIND ST  
HOBE SOUND, FL 33455 US

**Current Mailing Address:**

P.O. BOX 739  
MAYFIELD, KY 42066

**New Mailing Address:**

FEI Number: 65-0956303      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SOPKO, JAMES  
853 S.E. MONTEREY COMMONS BLVD.  
STUART, FL 34995 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 ( ) Delete  
Name: GSCHWIND, LINDA KAY  
Address: PO BOX 739  
City-St-Zip: MAYFIELD, KY 42066

Title: MGRM ( ) Delete  
Name: GSCHWIND, GARY EDWARD  
Address: PO BOX 739  
City-St-Zip: MAYFIELD, KY 42066

**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: GARY EDWARD GSCHWIND

MGR

04/07/2009

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