## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **Secretary of State DOCUMENT # M03000001593** 01-30-2007 90033 018 \*\*\*\*50.00 SANDWOOD LLC Principal Place of Business Mailing Address **40 BARBER TERRACE 40 BARBER TERRACE** SOUTH BURLINGTON, VT 05403 SOUTH BURLINGTON, VT 05403 CR2E083 (11/05) 01242007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FE1 Number 03-0270172 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CHRISTOPHER C. SANDERS, P.A. DO NOT WRITE 2837 - 1ST AVENUE NORTH ST. PETERSBURG, FL 33713 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or present name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR IIILE JAC PROPERTY MANAGEMENT LLC NAM **40 BARBER TERRACE** STREET ADDRESS CITY-ST-ZIP SOUTH BURLINGTON, VT 05403 TITLE F MAF STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS DO NOT WRITE CUTY-ST-ZIP IN THIS SPACE mr NAME STREET ADDRESS CITY-ST-ZIP TITLE MARKE STREET ADDRESS CITY-ST-7IP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: IG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

MUE PLANNE STREET ADDRESS CITY-ST-77P

FILED Jan 30, 2007 8:00 am