2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M03000004126

1. Entity Name WILDWOOD, LLC



FILED Jan 18, 2005 08:00 AM Secretary of State

Principal Place of Business 21 OVERBROOK CRESCENT NEW HARTFORD, NY 13413 Mailing Address

21 OVERBROOK CRESCENT NEW HARTFORD, NY 13413



01142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

1201 HAYS STREET TALLAHASSEE, FL 32301-2525			IN THIS SPACE	
	named entity submits this statement for the purpose of chailons of registered agent.	nging its registered office or registered agent, or be	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required whon reinstalling)	DATE	
Fi Do	iling Fee is \$50.00 ue by May 1, 2005		000000182379 01/19/05-80024-016 50.00	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM COOPER, DAVID A 21 OVERBROOK CRESCENT NEW HARTFORD, NY 13413	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. Thereby o	ertify that the information supplied with this filling does not c	rualify for the exemption stated in Section 119.07(3)	(i), Florida Statutes. I further certify that the information	

I neterly certify that the information supplied with this filing does not qualify for the exemption stated in Section 1990, John at Statutes. Horrier certify that the stromatic 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.

DAVID A. COOPER SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE 1/14/05

315-736-0151

Daytime Phone #