

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000140254

Entity Name: MOA WESTWIND, LLC

Current Principal Place of Business:

2714 W AZEELE ST
TAMPA, FL 33609

Current Mailing Address:

2714 W AZEELE ST
TAMPA, FL 33609 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABDONEY, MARK
2714 W AZEELE ST
TAMPA, FL 33609 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name LITTLE OCLOCKNEE PLANTAITON,
LLC
Address 2714 W AZEELE ST
City-State-Zip: TAMPA FL 33609

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LITTLE OCLOCKNEE PLANTATION, LLC

MGRM

02/26/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date