# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 15, 2009**
**Secretary of State**

DOCUMENT# 709433

**Entity Name:** WVUM, INC.

**Current Principal Place of Business:**

1306 STANFORD DRIVE
SUITE 110
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1211 DICKINSON DRIVE
SUITE 153
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number: 59-1729614** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

FISH, ALAN J
1507 LEVANTE AVENUE
327 MAX OROVITZ BUILDING
CORAL GABLES, FL 33146 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: WHITELY, PATRICIA A
Address: 1252 MEMORIAL DRIVE, #244
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: DUBORD, ROBERT J
Address: 1211 DICKINSON DRIVE #153
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: GOLDBERG, JUDD
Address: 1320 S DIXIE HIGHWAY, #1250
City-St-Zip: CORAL GABLES, FL 33146

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: PAUL, DRISCOLL D
Address: 5100 BRUNSON DRIVE #2038
City-St-Zip: CORAL GABLES, FL 33146

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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. DUBORD D 01/15/2009

Electronic Signature of Signing Officer or Director — Date