

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023319

Entity Name: WDM, LLC

FILED  
Jan 09, 2008  
Secretary of State

**Current Principal Place of Business:**

6036 PALOMAGLADE DR  
LITHIA, FL 33547

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 483  
RIVERVIEW, FL 33568

**New Mailing Address:**

FEI Number: 90-0224897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ANDRA ZACHOW SALVEGGI CPA PA  
6740 CROSSWINDS DRIVE N  
SUITE L-2  
SAINT PETERSBURG, FL 33710 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: MGR ( ) Delete  
Name: QUESSENBERRY, MARTIN  
Address: 6036 PALOMA GLADE DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: MGR ( ) Delete  
Name: QUESSENBERRY, MARLENA  
Address: 6036 PALOMA GLADE DRIVE  
City-St-Zip: LITHIA, FL 33547

**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: MARTIN QUESSENBERRY

MGR

01/09/2008

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