

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037125

FILED
May 08, 2009
Secretary of State

Entity Name: WJMP LLC

Current Principal Place of Business:

4540 SOUTHSIDE BLVD
702
JACKSONVILLE, FL 32216

New Principal Place of Business:

11512 LAKE MEAD AVE
JACKSONVILLE, FL 32256

Current Mailing Address:

13161 CRICKET COVE ROAD N
JACKSONVILLE, FL 32224

New Mailing Address:

8671 BIRGHAM CT S
DUBLIN, OH 43017

FEI Number: 20-1294881 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAZAR, WILLIAM J
13161 CRICKET COVE ROAD N
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

MAZAR, WILLIAM J
8671 BIRGHAM CT S
DUBLIN, FL 43017 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: _____

05/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAZAR, WILLIAM J
Address: 13161 CRICKET COVE ROAD N
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAZAR, WILLIAM J
Address: 8671 BIRGHAM CT S
City-St-Zip: DUBLIN, OH 43017

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: WILLIAM J MAZAR

MGR

05/08/2009

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