

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059742

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: 914 WPB, LLC

**Current Principal Place of Business:**

21631 CORONADO AVENUE  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

21631 CORONADO AVENUE  
BOCA RATON, FL 33433

**New Mailing Address:**

FEI Number: 20-3003368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD, #221E  
PALM BEACH GARDENS, FL 33410 US

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

MANGLES, SUE E  
21631 CORONADO AVENUE  
BOCA RATON, FL 33433 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: SUE ELAINE MANGLES

02/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SUE ELAINE MANGLES,  
Address: 21631 CORONADO AVENUE  
City-St-Zip: BOCA RATON, FL 33433

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

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MANGLES, SUE E  
Address: 21631 CORONADO AVENUE  
City-St-Zip: BOCA RATON, FL 33433

Title: MGR ( ) Change (X) Addition  
Name: LUNDGREN, ERIC A  
Address: 640 CYPRESS CLUB WAY, # 12-P  
City-St-Zip: DEERFIELD BEACH, FL 33064

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: SUE ELAINE MANGLES

MGR

02/09/2009

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