

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000034304

Entity Name: WSB 1507, LLC

Current Principal Place of Business:

2500 NORTHWINDS PARKWAY
275
ALPHARETTA, GA 30009

Current Mailing Address:

2500 NORTHWINDS PARKWAY
275
ALPHARETTA, GA 30009 US

FEI Number: 45-1041121

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMON, MICHAEL W
3839 NW BOCA RATON BLVD
100
BOCA RATON, FL 33431 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 MERRIMAN, SHAWNE
Address 2500 NORTHWINDS PARKWAY #275
City-State-Zip: ALPHARETTA GA 30009

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: SHAWNE MERRIMAN

MGRM

01/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date