

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012928

Entity Name: WAYGO INVESTMENTS, LLC

FILED  
Feb 10, 2004  
Secretary of State

## Current Principal Place of Business:

C/O GOODMAN & BREEN  
3838 TAMIAMI TRAIL N., SUITE 300  
NAPLES, FL 34103

## New Principal Place of Business:

C/O GOODMAN BREEN & GIBBS  
3838 TAMIAMI TRAIL N., SUITE 300  
NAPLES, FL 34103

## Current Mailing Address:

C/O GOODMAN & BREEN  
3838 TAMIAMI TRAIL N., SUITE 300  
NAPLES, FL 34103

## New Mailing Address:

C/O GOODMAN BREEN & GIBBS  
3838 TAMIAMI TRAIL N., SUITE 300  
NAPLES, FL 34103

FEI Number: 65-1129579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOODMAN & BREEN, A PROFESSIONAL ASSOCIATIO  
3838 TAMIAMI TRAIL N.  
SUITE 300  
NAPLES, FL 34103 US

## Name and Address of New Registered Agent:

GOODMAN BREEN & GIBBS,  
3838 TAMIAMI TRAIL N.  
SUITE 300  
NAPLES, FL 34103 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: KENNETH D. GOODMAN

02/10/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: GOODMAN, KENNETH D  
Address: 3838 TAMIAMI TRAIL N., SUITE 300  
City-St-Zip: NAPLES, FL 34103

## ADDITIONS/CHANGES:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETH D. GOODMAN

MGR

02/10/2004

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