

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006447

FILED
Mar 02, 2007
Secretary of State

Entity Name: WPS, LLC

Current Principal Place of Business:

P.O. BOX 1208
LAKE CITY, FL 32024

New Principal Place of Business:

1540 S.OHIO AVE.
LIVE OAK, FL 32060

Current Mailing Address:

POST OFFICE BOX 1208
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 04-3615533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, SCOTT
426 SW COMMERCE DR.
SUITE 130
LAKE CITY, FL 32025 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: MGRM () Delete
Name: STEWART, SCOTT
Address: POST OFFICE BOX 1208
City-St-Zip: LAKE CITY, FL 32056

Title: MGRM () Delete
Name: STRATTON, WENDY
Address: P.O. BOX 1208
City-St-Zip: LAKE CITY, FL 32056

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 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: SCOTT STEWART

PRES

03/02/2007

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