


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000013712</b> 1. Entity Name WOS PROPERTIES, LLC	
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Principal Place of Business 5736 WILLARD NORRIS ROAD MILTON, FL 32570	Mailing Address P.O. BOX 422 MILTON, FL 32572
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<b>DO NOT WRITE IN THIS SPACE</b>
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03212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 14-1852396	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  SALTER, WILLIAM O 5736 WILLARD NORRIS ROAD MILTON, FL 32570
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000900327  
04/29/08-80023-024 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SALTER, WILLIAM D 5736 WILLARD NORRIS RD MILTON, FL 32570
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 O. Salter 4-12-08  
WILLIAM O. SALTER DATE 850.994.4641