

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019204

Entity Name: WLD INVESTMENTS, LLC

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

401 E OLAS BLVD 2200
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

401 E LAS OLAS BLVD
SUITE 2200
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: 41-2054910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUCK, ROBERT J
401 EAST LAS OLAS BLVD.
SUITE 2200
FORT LAUDERDALE, FL 33301 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: HORVITZ, DAVID W TRUSTEE
Address: 401 E LAS OLAS BLVD 2200
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: ROTH, LINDA TRUSTEE
Address: 401 E LAS OLAS BLVD 2200
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: MGRM () Delete
Name: BERRICK, JAMES H TRUSTEE
Address: 401 E. LAS OLAS BLVD 2200
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

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

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 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: DAVID W HORVITZ

MMBR

03/09/2009

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