

FILED
Aug 12, 2003 8:00 am
Secretary of State

03-03-2003 90008 020 ****50.00

**2003 LIMITED LIABILITY COMPANY
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000027389					
1. Entity Name WS ACQUIREMENT, LLC					
Principal Place of Business 801 SOUTH OCEAN BLVD. DELRAY BEACH FL 33483			Mailing Address 801 SOUTH OCEAN BLVD. DELRAY BEACH FL 33483		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 368381584	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)</small>					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003			9. MANAGING MEMBERS / MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	William C. Swaney 801 South Ocean Blvd. DeRay Beach, FL 33483	<input type="checkbox"/> Delete	10. ADDITIONS / CHANGES	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>William C. Swaney</u> 5/25/2003 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SERVING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

William C. Swaney, Managing Member

CFR2003 (10/02)



55054009
#102000027389

PO BOX 8019 BALLSTON SPA, NY 12020-8019
518/884-7800 FAX: 518/884-7441

Via Certified Mail/Return Receipt Requested

August 6, 2003

PERSONAL & CONFIDENTIAL

Florida Department of State
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

RE: WS Acquirement, LLC
Reference No. L02000027389

Dear Sir or Madam:

We received the enclosed form and notice to file the 2003 Limited Liability Company Business Report for the above referenced entity. The notice indicates that the form should be filed no later than September 24, 2003.

WS Acquirement LLC already filed this report and the filing fee was already paid, as acknowledged in your letter dated March 5, 2003.

Also enclosed please find our correspondence to you dated April 29, 2003.

If you have any questions or the form is not sufficient as submitted, please do not hesitate to call me at 518/884-7900.

Sincerely,

Nancy R. Furnari
Account Manager

NRF/jag
Enclosures

cc: William C. Swaney
W. Michael Reickert

THE AYCO COMPANY, L.P.

attachment



AYCO

PO BOX 8019 BALLSTON SPA, NY 12020-8019
518/884-7800 FAX: 518/884-7441

03 m/f- misc.
18

55054009
#L02000027389

Via Certified Mail/Return Receipt Requested

April 29, 2003

PERSONAL & CONFIDENTIAL

Florida Department of State
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

RE: **WS Acquirement, LLC**
Reference No. L02000027389

Dear Sir or Madam:

In accordance with the enclosed letter, attached please find a copy of the 2003 Limited Liability Company Uniform Business Report with the additions requested in the enclosed letter.

Please note that as this Limited Liability Company is a single member LLC, the Federal Employer Identification number is the Social Security number of the sole member.

If you have any questions, please do not hesitate to call me at 518/884-7900.

Sincerely,

Nancy R. Funnari

Nancy R. Funnari
Associate Account Manager

NRF/jag
Enclosures

cc: William C. Swaney
W. Michael Reickert

THE AYCO COMPANY, L.P.