

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017666

Entity Name: WAMO, LLC

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

C/O CONDON MEEK INC.
1211 COURT STREET
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

C/O CONDON MEEK INC.
1211 COURT STREET
CLEARWATER, FL 33756

New Mailing Address:

18 GLENDALE STREET
APT 1
CLEARWATER, FL 33767

FEI Number: 56-2384611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYMOND, J. PAUL
625 COURT STREET, STE. 200
CLEARWATER, FL 33756 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: MEEK, JOHN
Address: 1211 COURT STREET
City-St-Zip: CLEARWATER, FL 33756

Title: MGRM () Delete
Name: WILCOX, DAVID
Address: 28 SANIBEL DR
City-St-Zip: FAIRPORT, NY 14450

Title: MGRM () Delete
Name: OGILVIE, SCOTT
Address: 18 GLENDALE STREET
City-St-Zip: CLEARWATER, FL 33767

Title: MGRM () Delete
Name: ALLBRITTON, DAVID
Address: 217 PALM ISLAND NW
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: WILCOX, DAVID
Address: 31 HYACINTH LANE
City-St-Zip: FAIRPORT, NY 14450

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: SCOTT OGILVIE

MGRM

01/25/2009

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