

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023242

Entity Name: WAH LLC

FILED
Apr 07, 2008
Secretary of State

Current Principal Place of Business:

9975 EQUUS CIRCLE
BOYNTON BEACH, FL 33437

New Principal Place of Business:

1411 N FLAGLER DR.
SUITE 4900
WEST PALM BEACH, FL 33401

Current Mailing Address:

9975 EQUUS CIRCLE
BOYNTON BEACH, FL 33437

New Mailing Address:

1411 N FLAGLER DR.
SUITE 4900
WEST PALM BEACH, FL 33401

FEI Number: 11-3698648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GY CORPORATE SERVICES INC.
777 SOUTH FLAGLER DRIVE
SUITE 500 EAST
WEST PALM BEACH, FL 33401 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: MGR () Delete
Name: HODGE, ANDREW
Address: 9975 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: M () Delete
Name: HODGE, ANDREW W
Address: 9975 EQUUS CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HODGE, W ANDREW
Address: 1411 N FLAGLER DR, SUITE 4900
City-St-Zip: WEST PALM BEACH, FL 33401 US

Title: M (X) Change () Addition
Name: HODGE, W ANDREW
Address: 1411 N FLAGLER DR, SUITE 4900
City-St-Zip: WEST PALM BEACH, FL 33401

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: W ANDREW HODGE

MGR

04/07/2008

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