2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023242

Entity Name: WAH LLC

Current Principal Place of Business:	**New Principal Place of Business:**
1411 N FLAGLER DR. SUITE 4900 WEST PALM BEACH, FL 33401	210 JUPITER LAKES BLVD BLDG 5000, STE 205 JUPITER, FL 33458

Current Mailing Address:	**New Mailing Address:**
1411 N FLAGLER DR. SUITE 4900 WEST PALM BEACH, FL 33401	210 JUPITER LAKES BLVD BLDG 5000, STE 205 JUPITER, FL 33458

FEI Number: 11-3698648   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
GY CORPORATE SERVICES INC. 777 SOUTH FLAGLER DRIVE SUITE 500 EAST WEST PALM BEACH, FL 33401 US	

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: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	Title: MGRM (X) Change ( ) Addition
Name:	HODGE, W ANDREW	Name: SIMON, CHRISTINA
Address:	1411 N FLAGLER DR, SUITE 4900	Address: 210 JUPITER LAKES BLVD, BLDG 5000, STE 205
City-St-Zip:	WEST PALM BEACH, FL 33401 US	City-St-Zip: JUPITER, FL 33458 US

Title:	M (X) Delete	Title: ( ) Change ( ) Addition
Name:	HODGE, W ANDREW	Name:
Address:	1411 N FLAGER DR, SUITE 4900	Address:
City-St-Zip:	WEST PALM BEACH, FL 33401	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: CHRISTINA SIMON   MGRM   04/24/2009
           _____
           Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date