2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# L03000030039

Entity Name: WILSON WORLDWIDE ENTERPRISES LLC

Current Principal Place of Business:

1955 S. W. LITTLE OAK TRAIL
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

1955 S. W. LITTLE OAK TRAIL
PALM CITY, FL 34990 US

New Mailing Address:

FEI Number: 73-1676229 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIZZUTI, JOSEPH
BEACON ACCOUNTING SERVICE, INC.
3135 SW MAPP ROAD
PALM CITY, FL 34990 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:	WILSON, VICTORIA K	
Address:	1955 S. W. LITTLE OAK TRAIL	
City-St-Zip:	PALM CITY, FL 34990 US	
Title:	MGRM	( ) Delete
Name:	WILSON, CRAIG D	
Address:	1955 S. W. LITTLE OAK TRAIL	
City-St-Zip:	PALM CITY, FL 34990 US	
Title:	MGRM	( ) Delete
Name:	MARTINO, LOUISE M	
Address:	1955 S. W. LITTLE OAK TRAIL	
City-St-Zip:	PALM CITY, FL 34990 US	

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: VICTORIA K. WILSON MGRM 01/09/2009

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