

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052075

Entity Name: WMG MUM LLC

FILED
May 05, 2009
Secretary of State

Current Principal Place of Business:

3455 PINE RIDGE ROAD STE. 101
NAPLES, FL 34109

New Principal Place of Business:

102 N. HARVARD BLVD.
LOS ANGELES, CA 90004

Current Mailing Address:

3455 PINE RIDGE ROAD STE. 101
NAPLES, FL 34109

New Mailing Address:

102 N. HARVARD BLVD.
LOS ANGELES, CA 90004

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GRANT, GLENN E
3455 PINE RIDGE ROAD STE. 101
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

GRANT, CARTER M
1586 GOLDEN HARVEST
NAPLES, FL 34109 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: CARTER M. GRANT

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRANT, GLENN E
Address: 3455 PINE RIDGE RD STE 101
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRANT, WILLIAM M
Address: 102 N. HARVARD BLVD.
City-St-Zip: LOS ANGELES, CA 90004

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: WILLIAM M. GRANT

MGR

05/05/2009

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