


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2008 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # L04000015120 1. Entity Name WKW ASSOCIATES, L.L.C. |  |
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|---|---|
| Principal Place of Business 5141 FORSYTH COMMERCE RD UNIT NO. 1 ORLANDO, FL 32807 | Mailing Address 5141 FORSYTH COMMERCE RD UNIT NO. 1 ORLANDO, FL 32807 |
|---|---|

DO NOT WRITE IN THIS SPACE



01042008No Chg-LLC

CR2E083 (12/07)

| | |
|---|-----------------------------------|
| 4. FEI Number 65-1220004 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

WILSON, W. HUGH JR
1066 BLACK ACRE TR.
WINTER SPRINGS, FL 32708

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000776819
01/09/08-80037-022 138.75

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR WILSON, W. HUGH JR 5141 FORSYTH COMMERCE RD ORLANDO, FL 32807 |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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. Hugh Wilson Jr. W Hugh Wilson Jr 01-09-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #