


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000019261 1. Entity Name WW VENTURE IV, LLC	
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Principal Place of Business 7207 OXBOW CIRCLE TALLAHASSEE, FL 32312 US	Mailing Address 7207 OXBOW CIRCLE TALLAHASSEE, FL 32312 US
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01042007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0855991	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SAUTTER, C. CHRISTIAN ESQ.
2850 NORTH ANDREWS AVENUE
FORT LAUDERDALE, FL 33311

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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITLEY, MARK P 7207 OXBOW CIRCLE TALLAHASSEE, FL 32312
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05/08/07-80044-014 50.00

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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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-23-07 (850) 894-0914
Date Daytime Phone #