

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000029217

**FILED  
Aug 09, 2008  
Secretary of State**

**Entity Name:** ALPHONZO PAGE WILKERSON, LLC

**Current Principal Place of Business:**

2046 TREASURE COAST PLAZA  
#289  
VERO BEACH, FL 32960 US

**New Principal Place of Business:**

**Current Mailing Address:**

2046 TREASURE COAST PLAZA  
#289  
VERO BEACH, FL 32960 US

**New Mailing Address:**

**FEI Number:** 11-3734521      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILKERSON, A. PAGE  
2046 TREASURE COAST PLAZA  
#289  
VERO BEACH, FL 32960 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:** WILKERSON, A. PAGE  
**Address:** 2046 TREASURE COAST PLAZA, SUITE 289  
**City-St-Zip:** VERO BEACH, FL 32960

**ADDITIONS/CHANGES:**

**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: A. PAGE WILKERSON

MGR

08/09/2008

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