

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045002

FILED
Mar 20, 2005
Secretary of State

Entity Name: WARIOTO PARTNERS, LLC

Current Principal Place of Business:

115 W. GLENWOOD DRIVE
CLARKSVILLE, TN 37040 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5
DESTIN, FL 32540 US

New Mailing Address:

115 W. GLENWOOD DRIVE
CLARKSVILLE, TN 37040 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEYD, JOSEPH M JR
1221 AIRPORT ROAD
SUITE 209
DESTIN, FL 32541 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/MEMBERS:

Title: MGRM () Delete
Name: THOMAS, KENT
Address: POST OFFICE BOX 5
City-St-Zip: DESTIN, FL 32540 US

Title: MGRM () Delete
Name: ISRAEL, GEORGE C JR
Address: 2730 19TH STREET SOUTH
City-St-Zip: HOMEWOOD, AL 35209 US

Title: MGRM () Delete
Name: MABRY, WILLIAM L
Address: 115 W. GLENWOOD DRIVE
City-St-Zip: CLARKSVILLE, TN 37040 US

Title: MGRM () Delete
Name: HALLIBURTON, JOHN T
Address: 480 SEVEN SPRINGS ROAD
City-St-Zip: CLARKSVILLE, TN 37043

Title: MGRM () Delete
Name: BEACH, WILLIAM G
Address: 2855 WIMBLEDON COURT
City-St-Zip: CLARKSVILLE, TN 37043

Title: MGRM () Delete
Name: BRADLEY, EARL O III
Address: 118 E. GLENWOOD DRIVE
City-St-Zip: CLARKSVILLE, TN 37040

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:

Title: () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), 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 L MABRY

MGRM

03/20/2005

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