## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000045002

Entity Name: WARIOTO PARTNERS, LLC

CLARKSVILLE, TN 37040

City-St-Zip:

FILED Jan 05, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 115 W. GLENWOOD DRIVE CLARKSVILLE, TN 37040 **Current Mailing Address: New Mailing Address:** 115 W. GLENWOOD DRIVE CLARKSVILLE, TN 37040 US FEI Number: 20-1265998 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHEYD, JOSEPH M JR 1221 AIRPORT ROAD SUITE 209 DESTIN, FL 32541 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete THOMAS, KENT Name: Name: POST OFFICE BOX 5 Address: Address: City-St-Zip: DESTIN, FL 32540 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition ISRAEL, GEORGE C JR Name: Name: Address: 2730 19TH STREET SOUTH Address: City-St-Zip: HOMEWOOD, AL 35209 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MABRY, WILLIAM L Name: Name: 115 W. GLENWOOD DRIVE Address: Address: City-St-Zip: CLARKSVILLE, TN 37040 US City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition Name: HALLIBURTON, JOHN T Name: 480 SEVEN SPRINGS ROAD Address: Address: City-St-Zip: CLARKSVILLE, TN 37043 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition BEACH, WILLIAM G Name: Name: 2855 WIMBLEDON COURT Address: Address: City-St-Zip: CLARKSVILLE, TN 37043 City-St-Zip: Title: () Delete Title: () Change () Addition BRADLEY, EARL O III Name: Name: Address: 118 E. GLENWOOD DRIVE Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: WILLIAM L. MABRY MGR 01/05/2006