

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060200

FILED  
Mar 29, 2009  
Secretary of State

Entity Name: WS 1ST ENTERTAINMENT GROUP, LLC

**Current Principal Place of Business:**

16394 DIAMOND STREET  
WHITE SPRINGS, FL 32096

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 53  
WHITE SPRINGS, FL 32096

**New Mailing Address:**

FEI Number: 55-0878469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROBINSON, AMBER MESHON  
16394 DIAMOND STREET  
WHITE SPRINGS, FL 32096 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: MGR ( ) Delete  
Name: ROBINSON, AMBER M  
Address: PO BOX 53 16394 DIAMOND ST  
City-St-Zip: WHITE SPRINGS, FL 32096

Title: MGR ( ) Delete  
Name: RUSS, SHAQUENYA Z  
Address: 1363 NW QUEEN RD  
City-St-Zip: LAKE CITY, FL 32055

Title: MGR ( ) Delete  
Name: ROBINSON, FREDERICK W  
Address: PO BOX 53 16394 DIAMOND ST  
City-St-Zip: WHITE SPRINGS, FL 32096

Title: MGR ( ) Delete  
Name: BROWN, MARSHALL J  
Address: 1363 NW QUEEN RD  
City-St-Zip: LAKE CITY, FL 32055

**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  
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: FREDERICK W. ROBINSON

MGR

03/29/2009

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