

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073162

FILED
Feb 17, 2005
Secretary of State

Entity Name: WWOW OF GAINESVILLE, LLC

Current Principal Place of Business:

1314 N.W. 94TH STREET
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

1314 N.W. 94TH STREET
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 76-0767561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEYMOUR, GAYLE T
1314 N.W. 94TH STREET
GAINESVILLE, FL 32606 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: SEYMOUR, GAYLE T
Address: 1314 NW 94TH ST
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM () Change (X) Addition
Name: CATHERINE, HUBER S
Address: 6570 NW 109TH PL
City-St-Zip: ALACHUA, FL 32615

Title: MGRM () Change (X) Addition
Name: GREEN, MARTHA J
Address: 5631 SW 35TH WAY
City-St-Zip: GAINESVILLE, FL 32608

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: GAYLE SEYMOUR

MGRM

02/17/2005

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