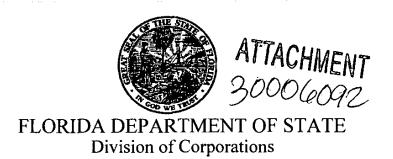
2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Apr 26, 2006 8:00 am Secretary of State DOCUMENT # L05000027226 1. Entity Name 03-03-2006 90004 027 ****50.00 WK ENTERPRISES, LLC Principal Place of Business ailing Address ATTN: MARILYN K. MILLS 200 SOUTH LAMAR STREET, SUITE 100 JACKSON MS 39201-4099 ATTN: MARILYN K. MILLS 200 SOUTH LAMAR STREET, SUITE 100 JACKSON MS 39201-4099 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State Applied For 4. FEI Number 20-25692 Not Applicable Zin Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the perposa of changing its registered office or registered agent, or both, in the State of Florida, the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept Signature, typed or p (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. TITLE MGRM Delete TITLE Change Addition NAME WATKINS, WALTER G JR MALA STREET ADDRESS STREET ADDRESS 127 SOUTHERN RIDGE DRIVE CITY-ST-Z.P CITY ST-ZIF MADISON MS 39110 HILE MGRM Delete TITLE ☐ Change Addition KRUTZ, FRED NAME NAME STREET ADORESS 1029 ANNANDALE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MADISON MS 39110 TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST. FR. CON ST. 70 ☐ Delete IIILE Change ■ Addition TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change TITLE TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY - ST - 712 CITY-ST-ZIP ☐ Add-tion TITLE TITLE Change Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-\$1-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 recorder of trustee empowered to execute this report as required by Chapter 608, Florida Statutes. 106 850-23(-121 SIGNATURE: SIGNATURE AND TYPED OF PRINTED IN THE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Dak

FILED



March 6, 2006

WK ENTERPRISES, LLC (DBA) COURTYARD WINE & CHEESE ATTN: MARILYN K. MILLS 200 SOUTH LAMAR STREET, SUITE 100 JACKSON, MS 39201-4099

Subject: WK ENTERPRISES, LLC

Reference Number:

L05000027226

Division of Corporations at (850) 245-6051.

/CD ANNUAL REPORTS SECTION



March 6, 2006

WK ENTERPRISES, LLC (DBA) COURTYARD WINE & CHEESE ATTN: MARILYN K. MILLS 200 SOUTH LAMAR STREET, SUITE 100 JACKSON, MS 39201-4099

Subject: WK ENTERPRISES, LLC

Reference Number:

L05000027226

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The records of the Division of Corporations do not reflect a name change has been filed for this limited liability company as indicated on the enclosed annual report/uniform business report. This report cannot be filed under the new name until an amendment has been filed. For your convenience, enclosed are the instructions and/or forms to change the name. Please return the amendment and annual report/uniform business report together to the address indicated on the amendment form.

The amendment filing fee is \$25.

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

_ Done

My mistake, No name change requested. requested.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

Thanks

If you have additional questions or need further assistance, please call the