

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043571

FILED  
Jul 18, 2006  
Secretary of State

Entity Name: WK & MD INVESTMENTS LLC

**Current Principal Place of Business:**

458C BAYSHORE DR.  
DESTIN, FL 32550

**New Principal Place of Business:**

**Current Mailing Address:**

458C BAYSHORE DR.  
DESTIN, FL 32550

**New Mailing Address:**

FEI Number: 20-2821196      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WILLIAMS, HANK  
458C BAYSHORE DR.  
DESTIN, FL 32550      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:**

Title: MGR      ( ) Delete  
Name: WILLIAMS, HANK  
Address: 458C BAYSHORE DR.  
City-St-Zip: DESTIN, FL 32550  
  
Title: MGRM      ( ) Delete  
Name: SMITH, DREW F  
Address: 3208 COUNTRY CLUB DRIVE  
City-St-Zip: PANAMA CITY, FL 32444

**ADDITIONS/CHANGES:**

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 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: HANK WILLIAMS

MGR

07/18/2006

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