

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000072473

FILED
Aug 28, 2009
Secretary of State**Entity Name:** WE SAY DEVELOPMENT, LLC**Current Principal Place of Business:**6115 LINNEAL BEACH DRIVE
APOPKA, FL 32703 US**New Principal Place of Business:**8000 LAKE LOWERY RD
HAINES CITY, FL 33844 US**Current Mailing Address:**6115 LINNEAL BEACH DRIVE
APOPKA, FL 32703 US**New Mailing Address:**8000 LAKE LOWERY RD
HAINES CITY, FL 33844 US**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:****Name and Address of New Registered Agent:**WEBER, FREDERICK J
8000 LAKE LOWERY RD
HAINES CITY, FL 33844 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: FREDERICK WEBER

08/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**ADDITIONS/CHANGES:**Title: MGRM () Delete
Name: DEVORE, DAVID A
Address: 11132 CYPRESS LEAF DR
City-St-Zip: ORLANDO, FL 32825 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGRM () Delete
Name: WEBER, FREDRICK J
Address: 8000 LAKE LOWERY RD
City-St-Zip: HAINES CITY, FL 33844 USTitle: () 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 WEBER

MGR

08/28/2009

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