2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083554

Entity Name: WOW INVESTORS, LLC

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

344 W. TURKEYFOOT LAKE ROAD 3730 TABS DRIVE **AKRON, OH 44319**

SUITE 4

UNIONTOWN, OH 44685

Current Mailing Address: New Mailing Address:

344 W. TURKEYFOOT LAKE ROAD 3730 TABS DRIVE

SUITE 4 **AKRON, OH 44319**

UNIONTOWN, OH 44685

ADDITIONS/CHANGES:

FEI Number: 20-3657232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ROSSI, DANIEL P RUNNELS, DAVAGE J III 623 CALHOUN AVENUE 4399 COMMONS DRIVE EAST SUITE 300

DESTIN, FL 32541 DESTIN, FL 32541 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: DAVAGE J RUNNELS III 04/23/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete (X) Change () Addition

JAYMAR HOLDINGS, L.P., . Name: JAYMAR HOLDINGS L.P. Name: 4316 NICHOLS ROAD Address: 3117 WINGEDFOOT DRIVE Address: City-St-Zip: MEDINA, OH 44256 City-St-Zip: LAKELAND, FL 33803

(X) Change () Addition Title: MGRM () Delete Title: MEMB

CENTURY DEVELOPMENT, GROUP, INC. Name: HARVEY, TIMOTHY Name: Address: 344 W. TURKEYFOOT LAKE ROAD Address: 3730 TABS DRIVE, SUITE 4 City-St-Zip: **AKRON, OH 44319** City-St-Zip: UNIONTOWN, OH 44685

Title: MGRM () Delete Title: MEMB (X) Change () Addition DP ROSSI INVESTMENTS, , INC. DP ROSSI INVESTMENTS, , INC. Name: Name: 623 CALHOUN AVENUE Address: 623 CALHOUN AVENUE Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip: DESTIN, FL 32541

Title: MGRM () Delete Title: MEMB (X) Change () Addition Name: TANNEY, MARK Name: TUCKER, ROBERT M 2504 PELLICAN BAY DRIVE

Address: Address: 3730 TABS DRIVE, SUITE 4 UNIONTOWN, OH 44685 City-St-Zip: PANAMA CITY BEACH, FL 32408 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: TIMOTHY HARVEY **MEMB** 04/23/2008