

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085441

FILED
Jan 17, 2007
Secretary of State

Entity Name: WORLDWIDE HUSTLER, LLC

Current Principal Place of Business:

533 ALAFAYA WOODS BLVD.
D
OVIEDO, FL 32765 US

Current Mailing Address:

23 ALAFAYA WOODS
301
OVIEDO, FL 32765 US

New Principal Place of Business:

23 ALAFAYA WOODS BLVD.
301
OVIEDO, FL 32765 US

New Mailing Address:

23 ALAFAYA WOODS BLVD
301
OVIEDO, FL 32765 US

FEI Number: 20-3378081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, RENEE
1100 RIDGE ROAD
LONGWOOD, FL 32750 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/MANAGERS:

Title: MGR () Delete
Name: CHERRY, LEE
Address: 533 ALAFAYA WOODS BLVD. # D
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM () Delete
Name: MCLEOD, DOUGLAS
Address: 533 ALAFAYA WOODS BLVD. # D
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHERRY, LEE
Address: 960 ENGLISH TOWN LANE, #210
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: MGRM (X) Change () Addition
Name: MCLEOD, DOUGLAS
Address: 960 ENGLISH TOWN LANE, #210
City-St-Zip: WINTER SPRINGS, FL 32708 US

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: LEE M CHERRY

MGR

01/17/2007

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