2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000087836

1. Entity Name
WAM EIGHT, LLC

Principal Place of Business	Mailing Address
3115 SOUTH FEDERAL HWY DELRAY BEACH, FL 33483 US	3115 SOUTH FEDERAL HWY DELRAY BEACH, FL 33483 US

DO NOT WRITE IN THIS SPACE

03142007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number 55-0904417	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCCAULEY, MARK
3115 SOUTH FEDERAL HWY
DELRAY BEACH, FL 33483

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _Mark McCauley_   3/12/07

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2007

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MCCAULEY, MARK
STREET ADDRESS	3115 SOUTH FEDERAL HWY
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
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CITY-ST-ZIP	

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03/27/07-80107-005 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _Mark McCauley_   3/12/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #