

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014442

Entity Name: WMKG, LLC

FILED  
Feb 01, 2007  
Secretary of State

## Current Principal Place of Business:

1049 OAK ARBOR CIR.  
ST. AUGUSTINE, FL 32084

## New Principal Place of Business:

250 N ATLANTIC AVENUE  
SUITE # 106 A & B  
DAYTONA BEACH, FL 32118

## Current Mailing Address:

1049 OAK ARBOR CIR.  
ST. AUGUSTINE, FL 32084

## New Mailing Address:

250 N ATLANTIC AVENUE  
SUITE # 106 A  
DAYTONA BEACH, FL 32118

FEI Number: 51-0568069

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNS, CHARLES W  
1049 OAK ARBOR CIR.  
ST. AUGUSTINE, FL 32084 US

## Name and Address of New Registered Agent:

JOHNS, CHARLES W  
250 N ATLANTIC AVENUE  
SUITE # 106 A  
DAYTONA BEACH, FL 32118 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:

02/01/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: JOHNS, CHARLES W  
Address: 1049 OAK ARBOR CIR.  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRM ( ) Delete  
Name: JOHNS, ISABEL M  
Address: 1049 OAK ARBOR CIR.  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: JOHNS, CHARLES W  
Address: 250 N ATLANTIC AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGRM (X) Change ( ) Addition  
Name: JOHNS, ISABEL M  
Address: 250 N ATLANTIC AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGRM ( ) Change (X) Addition  
Name: MCLANE, LARRY G  
Address: 250 N ATLANTIC AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32118

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: ISABEL M JOHNS

MGRM

02/01/2007

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