2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Secretary of State **DOCUMENT # L06000057105** 03-19-2008 90149 047 ***138.75 1. Entity Name WT PROPERTIES, LLC Principal Place of Business Mailing Address 1034 RIDGEWOOD AVE STE 1 60015852 1034 RIDGEWOOD AVE STE 1 HOLLY HILL, FL 32117 HOLLY HILL, FL 32117 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03122008 CR2E083 (12/06) Chg-LLC City & State City & State Applied For 4. FEI Number 20-2545802 Not Applicable Zip Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Rogistered Agent ---Name TYLER, STEVE W Street Address (P.O. Box Number is Not Acceptable) 1034 RIDGEWOOD AVE STE 1 ORMOND BEACH, FL 32174 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM XX Change MGRM Delete MILE TITLE Waikins, Virginia TYLER, STEVE W NAME NAME STREET ADDRESS 1034 RIDGEWOOD AVE STE 1 STREET ADDRESS 1034 Ridgewood Ave. #1 CITY-ST-ZIP HOLLY HILL, FL 32117 CITY-ST-71P Holly Hill, FL 32117 XX Netete MGRM K X change . Addition TILE TITLE TYLER INVESTMENT PROPERTIES, LLC Tyler Investments Properties LLC NAME NAME STREET ADDRESS 721 RIDGEWOOD AVENUE, #12A STREET ADDRESS 1034 Ridgewood Ave. #1 HOLLY HILL, FL 32117 CITY-ST-ZIP CITY-ST-ZIP Holly Hill, FL 32117 MΠF ☐ Delete ΠΠF ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CHY-SI-7P ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 mustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Steve W. Tyler

FILED Mar 19, 2008 8:00 am