

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060825

Entity Name: WGC ENTERPRISES, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

5340 OLD KINGS ROAD
JACKSONVILLE, FL 32254 US

New Principal Place of Business:

Current Mailing Address:

5340 OLD KINGS ROAD
JACKSONVILLE, FL 32254 US

New Mailing Address:

FEI Number: 56-2592708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LONKER, WHITNEY R ESQUIRE
519 ROCKWOOD CT.
ORANGE PARK, FL 32065 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: CHABOUDE, WALTER G
Address: 1415 FIRST STREET NORTH #202
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: MGR () Delete
Name: WONORSKI, JANET
Address: 158 SPORTSMAN DR.
City-St-Zip: WELAKA, FL 32193 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CHABOUDE, WALTER G
Address: 12235 HAWKSTOWE LANE
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: () Change () Addition
Name:
Address:
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: WALTER CHABOUDE

MR

04/14/2009

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