

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060978

Entity Name: ZMW, L.L.C.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

5532 SHADOW GROVE BOULEVARD
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

5532 SHADOW GROVE BOULEVARD
PENSACOLA, FL 32526

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE
2721 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

Name and Address of New Registered Agent:

KERRY ANNE SCHULTZ, ESQUIRE
2045 FOUNTAIN PROFESSIONAL COURT
SUITE A
NAVARRE, FL 32566 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: KERRY ANNE SCHULTZ, ESQUIRE

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZEPP, DOUGLAS T JR.
Address: 5532 SHADOW GROVE
City-St-Zip: PENSACOLA, FL 32526

Title: MGRM () Delete
Name: ZEPP, SHERRILYN M
Address: 5532 SHADOW GROVE
City-St-Zip: PENSACOLA, FL 32526

Title: MGRM () Delete
Name: WIGGINS, TERRY D
Address: 2771 WELLER AVENUE
City-St-Zip: PENSACOLA, FL 32507

Title: MGRM () Delete
Name: WIGGINS, BARBARA M
Address: 2771 WELLER AVENUE
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DOUGLAS T. ZEPP, JR.

MGRM

01/14/2009

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