2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: Willer / HOTVEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED Feb 20, 2007 8:00 am Secretary of State

02-20-2007 90367 022 ****50.00

770.448.0300

DOCUMENT # L06000086859 1. Entity Name WC V, LLC					02-20-2007	90367 022 ****5	0.00	
•	e of Business	Mailing Address			•	, t.,		
320 RIVERHALL COURT DUNWOODY, GA 30350		320 RIVERHALL COURT DUNWOODY, GA 30350			600168	Hn.		
DOM DOM		DOMINOODT, OA 30330			000100	79	- -	
O Deineinal F	Near of Durings No. D.O. Double							
2. Principal Place of Business - No P.O. Box #		4030 Johns Creek Pkwy		, 1 1 1 1 1	1 B.B.III BIIII B.B.III £8111 60		3881 111 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01302007	Chg-LLC	CR2E083 (12/06)		
City & State		City & State			•	• •	oplied For	
City di State		Suwance GA		4. PELINUME	°20 -556	5531 No	ot Applicable	
Zip	Country	7002U	Country		of Status Desired	S5.00 Add		
	6. Name and Address of Current I			7. Name and	Address of New F			
			Name	Name				
WILSON, MICHAEL J 200 SOUTH ORANGE AVE.			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
SARASOTA, FL 34236					· · · · · · · · · · · · · · · · · · ·	·		
	<i>t</i> -							
- 			City			FL Zip Cod	e	
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.								
the obligations of registered agent.								
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	gistered Agent signature r	required when reinstating)		DATE	· ·	
•								
Filing Fee is \$50.00 Due by May 1, 2007								
Fi	iling Fee is \$50.00					te check payable to		
Fi D	iling Fee is \$50.00 ue by May 1, 2007					te check payable to a Department of State	e	
9.	ue by May 1, 2007 MANAGING MEMBE	RS/MANAGERS	10.			a Department of Stat	e	
9. TITLE	MANAGING MEMBEI	RS/MANAGERS	TITLE		Florid	a Department of Stat	e Addition	
9.	MANAGING MEMBER M GRM Duane Hooker	☐ Delete			Florid	A Department of State /CHANGES		
9. TITLE NAME	MANAGING MEMBEI M GRM Duane Hooky 320 Rivema II Cou	☐ Delete	TITLE NAME		Florid	A Department of State /CHANGES		
9. TITLE NAME STREET ADDRESS	MANAGING MEMBEI M GRM Duane Hooker 320 Riverna II Cou- Atlanta GA 30350 M GRM	☐ Delete	TITLE NAME STREET ADDRESS		Florid	A Department of State /CHANGES		
9. IIILE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME	MANAGING MEMBEI M GRM Duane Hooker 320 Riverhall Cou- Atlanta GA 30350 M GRM Dan Miller	Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME		Florid	a Department of State /CHANGES ☐ Change	☐ Addition	
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