

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000045675

Entity Name: WMW HOLDINGS, LLC

**FILED**  
**Apr 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5622 NW 43RD ST  
GAINESVILLE, FL 32653 US

**New Principal Place of Business:**

**Current Mailing Address:**

6504 NW 50TH LANE  
GAINESVILLE, FL 32653 US

**New Mailing Address:**

FEI Number: 59-3841718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WITT, WILLIAM M  
6504 NW 50TH LANE  
GAINESVILLE, FL 32653 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: MGRM  
Name: WITT, WILLIAM M  
Address: 6504 NW 50TH LANE  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGRM  
Name: WITT, SANDRA J WITT  
Address: 6504 NW 50TH LANE  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: MGRM  
Name: WITT, AMANDA M  
Address: 207 EAST DAVIS STREET  
City-St-Zip: DECATUR, GA 30030 US

I hereby 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: WILLIAM M. WITT

MGFM

04/06/2010

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