

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000109817

Entity Name: WICKEY22, LLC

**FILED**  
**Feb 02, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

22 LAS PALMAS WAY  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

22 LAS PALMAS WAY  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 06-1834426

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WICKEY, ALLISON  
22 LAS PALMAS WAY  
SANTA ROSA BEACH, FL 32459 US

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

WICKEY, ALLISON J ALLISON  
22 LAS PALMAS WAY  
SANTA ROSA BEACH, FL 32459 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: ALLISON WICKEY

02/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WICKEY, ALLISON  
Address: 22 LAS PALMAS WAY  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WICKEY, ALLISON J ALLISON  
Address: 22 LAS PALMAS WAY  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: ALLISON WICKEY

MGR

02/02/2009

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