

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000007168

Entity Name: WISA MANAGEMENT, LLC

FILED  
Feb 03, 2010  
Secretary of State

**Current Principal Place of Business:**

2590 SW CHOCTAW  
PORT ST LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

2590 SW CHOCTAW  
PORT ST LUCIE, FL 34953

**New Mailing Address:**

FEI Number: 26-1787906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILCOX, SAMUEL B  
2590 SW CHOCTAW  
PORT ST LUCIE, FL 34953 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: WILCOX, SAMUEL B  
Address: 2590 SW CHOCTAW  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM  
Name: WILCOX, CLARENCE V  
Address: 3771 SIERRA DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

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: SAMUEL B WILCOX

MGRM

02/03/2010

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