2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045783

Entity Name: WAGNUT HIGH FIVES LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3730 TIGER POINT BLVD. GULF BREEZE, FL 32563 US **Current Mailing Address: New Mailing Address:** 3730 TIGER POINT BLVD. GULF BREEZE, FL 32563 US FEI Number: 61-1561636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WAGGONER, TERRACE L JR. 3730 TIGER POINT BLVD. GULF BREEZE, FL 32563 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: (X) Change () Addition () Delete WAGGONER, TERRACE L JR. WAGGONER, TERRACE L JR. Name: Name: Address: 3730 TIGER POINT BLVD. Address: 3730 TIGER POINT BLVD. City-St-Zip: GULF BREEZE, FL 32563 US City-St-Zip: GULF BREEZE, FL 32563 US Title: Title: () Change (X) Addition () Delete WAGGONER, TERRACE L SR. Name: Name: Address: Address: 3730 TIGER POINT BLVD. City-St-Zip: City-St-Zip: GULF BREEZE, FL 32563 US Title: () Delete Title: () Change (X) Addition WAGGONER, THERESA L Name: Name: 3730 TIGER POINT BLVD. Address: Address:

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.

City-St-Zip:

SIGNATURE: TERRACE L. WAGGONER JR.

City-St-Zip:

CEO

GULF BREEZE, FL 32563 US

04/15/2009