

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056801

Entity Name: WAWW14, LLC

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

401 EAST LAS OLAS BLVD.  
1650  
FT. LAUDERDALE, FL 33301 US

## New Principal Place of Business:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

## Current Mailing Address:

401 EAST LAS OLAS BLVD.  
1650  
FT. LAUDERDALE, FL 33301 US

## New Mailing Address:

515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

FEI Number: 26-2922911

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WRIGHT, BLANDIN  
401 EAST LAS OLAS BLVD.  
2250  
FT. LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: KATIE WONSCH, ASSISTANT SECRETARY

04/30/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ROTHSTEIN, SCOTT W  
Address: 401 EAST LAS OLAS BLVD., SUITE 1650  
City-St-Zip: FT. LAUDERDALE, FL 33301 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BAHIA PROPERTY MANAGEMENT, LLC  
Address: 615 SOUTH DUPONT HIGHWAY  
City-St-Zip: DOVER, DE 19901 US

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: DAVID BODEN

MGR

04/30/2009

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