

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000036915

Entity Name: WSFM1 LLC

**FILED**  
**Jan 31, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

549 NE 21 COURT  
WILTON MANORS, FL 33305 US

**New Principal Place of Business:**

**Current Mailing Address:**

549 NE 21 COURT  
WILTON MANORS, FL 33305 US

**New Mailing Address:**

FEI Number: 27-0263825

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCJUNKIN, WILLIAM S  
549 NE 21 COURT  
WILTON MANORS, FL 33305 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: MCJUNKIN, WILLIAM S  
Address: 549 NE 21 COURT  
City-St-Zip: WILTON MANORS, FL 33305 US

Title: MGRM  
Name: MCJUNKIN, FRANCES  
Address: 549 NE 21 COURT  
City-St-Zip: WILTON MANORS, FL 33305 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: W S MCJUNKIN

MGRM

01/31/2011

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