

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000131694

Entity Name: THE WEST WING, LLC

FILED
Apr 21, 2011
Secretary of State

Current Principal Place of Business:

16185 HIGHWAY 34 WEST
DELAPLAINE, AR 72425

New Principal Place of Business:

Current Mailing Address:

6631 TOMY LEE TRAIL
TALLAHASSEE, FL 32309

New Mailing Address:

347 SKATE DRIVE
TALLAHASSEE, FL 32312

FEI Number: 27-4391555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KLAPPAS, PETER J
6631 TOMY LEE TRAIL
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

SWEARINGEN, CHAD M
347 SKATE DRIVE
TALLAHASSEE, FL 32312 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: CHAD M SWEARINGEN

04/21/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SWEARINGEN, CHAD M
Address: 347 SKATE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM
Name: RHYNE, DAVID N JR.
Address: 3966 NASH CREEK ESTATES
City-St-Zip: OPELIKA, AL 36804

Title: MGRM
Name: KELLEY, RONALD E III
Address: 3503 MARVYN PARKWAY #174
City-St-Zip: OPELIKA, AL 36804

Title: MGRM
Name: KLAPPAS, PETER J
Address: 1910 RAIN VALLEY CT.
City-St-Zip: TALLAHASSEE, FL 32308

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: CHAD M SWEARINGEN

RA

04/21/2011

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