# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L97000000534

1. Entity Name
WWSM LIMITED LIABILITY COMPANY

FILED
00 FEB -4 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| Principal Place of Business | Mailing Address |
|---|---|
| 2340 PERIWINKLE WAY<br>SUITE J-3<br>SANIBEL ISLAND FL 33957 | 2340 PERIWINKLE WAY<br>SUITE J-3<br>SANIBEL ISLAND FL 33957-3220 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 2340 Periwinkle Way | 2340 Periwinkle Way |
| Suite, Apt. #, etc.: Suite I-2 | Suite, Apt. #, etc.: Suite I-2 |
| City & State: Sanibel Island, Florida | City & State: Sanibel Island, Florida |
| Zip: 33957 Country: USA | Zip: 33957 Country: USA |

4. FEI Number 65-0754789 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

RATLIFF, ROBERT LEE III
2340 PERIWINKLE WAY
SUITE J-3
SANIBEL ISLAND FL 33957

**7. Name and Address of New Registered Agent**

Name: Ratliff, Robert Lee III
Street Address (P.O. Box Number is Not Acceptable): 2340 Periwinkle Way, S
Suite I-2
City: Sanibel Island FL Zip Code: 33957

8. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS $50.00**
**Make Check Payable to Department of State**

200003128432--4
-02/09/00--01001--014
*****50.00 *****50.00

| 9. MANAGING MEMBERS/MEMBERS | | | 10. ADDITIONS/CHANGES | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>WEBSTER, THOMAS<br>2340 PERIWINKLE WAY, STE J-3<br>SANIBEL ISLAND FL 33957 | ☐ Delete | MGRM<br>Webster, Thomas<br>2340 Periwinkle Way, Suite I-2<br>Sanibel Island, Florida 33957 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>WEBSTER, THOMAS<br>2340 PERIWINKLE WAY, STE J-3<br>SANIBEL ISLAND FL 33957 | ☐ Delete | MGRM<br>Webster, Thomas<br>2340 Periwinkle Way, Suite I-2<br>Sanibel Island, Florida 33957 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>WEBSTER, HELEN<br>2340 PERIWINKLE WAY, STE J-3<br>SANIBEL ISLAND FL 33957 | ☐ Delete | MGRM<br>Webster, Helen<br>2340 Periwinkle Way, Suite I-2<br>Sanibel Island, Florida 33957 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MGRM<br>MOWBRAY, BRENDA<br>2340 PERIWINKLE WAY, STE J-3<br>SANIBEL ISLAND FL 33957 | ☐ Delete | MGRM<br>Mowbray, Brenda<br>2340 Periwinkle Way, Suite I-2<br>Sanibel Island, Florida 33957 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | MEM<br>RATLIFF, ROBERT LEE<br>2340 PERIWINKLE WAY<br>SANIBEL ISLAND FL 33957 | ☐ Delete | MEM<br>Ratliff, Robert Lee III<br>2340 Periwinkle Way, Suite I-2<br>Sanibel Island, Florida 33957 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | | ☐ Change ☐ Addition |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** SIGNATURE REQUIRED 2-2-00 941-395-1300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #