

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001001

FILED
Mar 02, 2004
Secretary of State

Entity Name: WT & M ENTERPRISES, LLC

Current Principal Place of Business:

6 PERTH DRIVE
STRATHAM, NH 03885

New Principal Place of Business:

Current Mailing Address:

6 PERTH DRIVE
STRATHAM, NH 03885

New Mailing Address:

FEI Number: 02-0529212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTES, MARGARET J
664 E. PINE AVE.
EASTPOINT, FL 32328 US

Name and Address of New Registered Agent:

ESTES, MARGARET J
664 E. PINE AVE.
ST. GEORGE ISLAND, FL 32328 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: MARGARET J. ESTES

03/02/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: STALKER, WILL
Address: 6 PERTH DRIVE
City-St-Zip: STRATHAM, NH 03885

Title: MGRM () Delete
Name: TRUESDALE, TONI
Address: 4730 SYCAMORE ROAD
City-St-Zip: QUINCY, FL 32351

Title: MGRM () Delete
Name: ESTES, MARGARET
Address: 664 E. PINE AVE.
City-St-Zip: ST. GEORGE ISLAND, FL 32328

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARGARET J. ESTES

MGRM

03/02/2004

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