

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000102

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** WEALTH ADVISORY ASSOCIATES LLC

**Current Principal Place of Business:**

1465 SOUTH FORT HARRISON, SUITE 103  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

1465 SOUTH FORT HARRISON, SUITE 103  
CLEARWATER, FL 33756

**New Mailing Address:**

1739 EAGLES NEST DRIVE  
BELLEAIR, FL 33756

**FEI Number:** 38-3770974

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MUSIC, P. CHRISTOPHER  
1739 EAGLES NEST DRIVE  
CLEARWATER, FL 33756 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:** MUSIC, P CHRISTOPHER  
**Address:** 1739 EAGLES NEST DRIVE  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** CEO  
**Name:** MUSIC, DIANE H  
**Address:** 1739 EAGLES NEST DRIVE  
**City-St-Zip:** BELLEAIR, FL 33756

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:** P. CHRISTOPHER MUSIC

MGRM

01/13/2010

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