

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121142

Entity Name: W.A.B., L.L.C.

Current Principal Place of Business:

4820 PARK STREET
PARKER, FL 32404

Current Mailing Address:

4820 PARK STREET
PARKER, FL 32404

FEI Number: 20-8634045

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J
427 MCKENZIE AVE
PANAMA CITY, FL 32401 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	BEASON, ALAN C	Name	BEASON, WANDA S
Address	4820 PARK STREET	Address	4820 PARK STREET
City-State-Zip:	PARKER FL 32404	City-State-Zip:	PARKER FL 32404

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WANDA S BEASON

MANAGER

04/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date