


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90035 029 ****50.00

DOCUMENT # L05000005414

1. Entity Name
 A & W PROPERTIES, LLC



Principal Place of Business
 1474 JORDAN HILLS COURT
 CLEARWATER, FL 33756 US

Mailing Address
 1474 JORDAN HILLS COURT
 CLEARWATER, FL 33756 US

20026696



2. Principal Place of Business
 4250 Central Avenue
 Suite, Apt. #, etc.

3. Mailing Address
 4250 Central Avenue
 Suite, Apt. #, etc.

03292006 Chg-LLC CR2E083 (11/05)

City & State
 St. Petersburg FL

City & State
 St. Petersburg FL

Zip
 33711

Country
 USA

Zip
 33711

Country
 USA

4. FEI Number
 20-2432791

Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUNSON, JOHN MORGAN ESQ.
 1474 JORDAN HILLS COURT
 CLEARWATER, FL 33756

7. Name and Address of New Registered Agent

Name
 Brunson, John Morgan, Esq.

Street Address (P.O. Box Number is Not Acceptable)
 4250 Central Avenue

City
 St. Petersburg

FL

Zip Code
 33711

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John Morgan Brunson* John Morgan Brunson 3-30-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00 Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRUNSON, JOHN MORGAN ESQ. 1474 JORDAN HILLS COURT CLEARWATER, FL 33756 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOOTZ, MATTHEW T 1474 JORDAN HILLS COURT CLEARWATER, FL 33756 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Brunson, John Morgan 4250 Central Avenue St. Petersburg FL 33711 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Mootz, Matthew T. 4250 Central Avenue St. Petersburg FL 33711 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *John Morgan Brunson* John Morgan Brunson 3-30-06 (921) 828-0586
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #