


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**


**DOCUMENT # L05000042481**

1. Entity Name  
 TWB ENTERTAINMENT, LLC



Principal Place of Business 6224 14TH STREET W. BRADENTON, FL 34207	Mailing Address 6224 14TH STREET W. BRADENTON, FL 34207
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**DO NOT WRITE IN THIS SPACE**



04202007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 20-2783325	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, P.A. 150 WEST FLAGLER STREET, SUITE 2200 C/O CARLOS CANINO  
 MIAMI, FL 33130

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**


9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, CECIL 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, KEVIN 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CONWAY, TIM 2673 MONOCACY FORD RD. MOUNT AIRY, MD 21771
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, ANN 2673 MONOCACY FORD RD. FREDERICK, MD 21701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 05/15/07-80103-013,50.00

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:       Date: 4/23/07      Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE