

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095707

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: AW CAPITAL PARTNERS I, LLC

**Current Principal Place of Business:**

2801 PGA BLVD STE 220  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

2801 PGA BLVD STE 220  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 26-3529255      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WAXMAN, BRIAN K  
2801 PGA BLVD STE 220  
PALM BEACH GARDENS, FL 33410      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      ( ) Delete  
Name: WAXMAN, BRIAN K  
Address: 2801 PGA BLVD STE 220  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: MGRM      ( ) Delete  
Name: APPLEFIELD, PETER J  
Address: 2801 PGA BLVD STE 220  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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

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

Title: AGEN      ( ) Change      (X) Addition  
Name: LIBERTY, MALI  
Address: 2801 PGA BLVD, SUITE 220  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRIAN K WAXMAN

MGRM

04/29/2009

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