2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 04, 2006
Secretary of State

DOCUMENT# F93000004414

Entity Name: TMW INVESTMENTS, INC.

Current Principal Place of Business:

2 RAVINIA DRIVE
STE 400
ATLANTA, GA 303462104 US

New Principal Place of Business:

Current Mailing Address:

C/O PREI
2 RAVINIA DRIVE, SUITE 400
ATLANTA, GA 30346 US

New Mailing Address:

FEI Number: 58-2015459 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCWHIRTER, THOMAS F JR.
Address: 2 RAVINIA DR STE 400
City-St-Zip: ATLANTA, GA 303462104

Title: CD ( ) Delete
Name: VON WERZ, GEORGE
Address: PRANNERSTRASSE 1
City-St-Zip: 80333 MUNICH GE,

Title: D ( ) Delete
Name: TRESCHER, KLAUS
Address: PRANNERSTRASSE 1
City-St-Zip: 80333 MUNICH, GE

Title: V ( ) Delete
Name: PAHL, DAVID C.
Address: 2 RAVINIA DR STE 400
City-St-Zip: ATLANTA, GA 303462104

Title: V ( ) Delete
Name: HOWELL, BARRY L
Address: TWO RAVINIA DRIVE SUITE 400
City-St-Zip: ATLANTA, GA 303462104

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: V ( ) Change (X) Addition
Name: ROSE, JOHN A
Address: TWO RAVINIA DRIVE, SUITE 400
City-St-Zip: ATLANTA, GA 303462104

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN A. ROSE V 01/04/2006

Electronic Signature of Signing Officer or Director — Date