


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2006 8:00 am
Secretary of State

08-31-2006 90001 019 ***500.00

DOCUMENT # J45462 1. Entity Name RWH PROPERTIES, INC.					
Principal Place of Business 2377 GULF OF MEXICO DR. UNIT 2 E-1 LONGBOAT KEY, FL 34228 US			Mailing Address 2377 GULF OF MEXICO DR. UNIT 2 E-1 LONGBOAT KEY, FL 34228 US		
2. Principal Place of Business 6923 Winnies Circle Suite, Apt. #, etc.		3. Mailing Address 6923 Winnies Circle Suite, Apt. #, etc.			
City & State Lakewood Ranch Zip Country 34202 USA		City & State Lakewood Ranch Zip Country 34202 USA		4. FEI Number 59-2766498	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HOFFMAN, ROBERT W. 2377 GULF OF MEXICO DR. UNIT 2 E-1 LONGBOAT KEY, FL 34228			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6923 Winnies Circle City Lakewood Ranch FL Zip Code 34202		
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 _____					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE P NAME HOFFMAN, WILLIAM R. STREET ADDRESS 2377 GULF OF MEXICO DR. CITY-ST-ZIP LONGBOAT KEY, FL 34228	<input type="checkbox"/> Delete		TITLE Change NAME 6923 Winnies Circle STREET ADDRESS Lakewood Ranch, FL 34202 CITY-ST-ZIP	<input type="checkbox"/> Addition	
TITLE VP NAME HOFFMAN, ROBERT W. STREET ADDRESS 2377 GULF OF MEXICO DR. CITY-ST-ZIP LONGBOAT KEY, FL 34228	<input type="checkbox"/> Delete		TITLE Change NAME 6923 Winnies Circle STREET ADDRESS Lakewood Ranch, FL 34202 CITY-ST-ZIP	<input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		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"/> Delete		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"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: X Robert Hoffman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			X 8/24/06 Date Daytime Phone #		