

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000010542

1. Entity Name
JRW PARTNERS, L.L.C.



Principal Place of Business
651 BRYN MAWR STREET
ORLANDO, FL 32804

Mailing Address
651 BRYN MAWR STREET
ORLANDO, FL 32804



01052004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3665916

Applied For
Not Applicable

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

5. Name and Address of Current Registered Agent

WOOD, JAMES R
651 BRYN MAWR STREET
ORLANDO, FL 32804

**DO NOT WRITE
IN THIS SPACE**

6. 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

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, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
WOOD, JAMES R
651 BRYN MAWR STREET
ORLANDO, FL 32804

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
WOOD, J. KURT
651 BRYN MAWR STREET
ORLANDO, FL 32804

TITLE
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STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: James R. Wood (James R. Wood) 01/05/2004 407-245-8330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #