

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015480

Entity Name: BCW FAMILY, L.L.C.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1861 NW 123 AVENUE
PEMBROKE PINES, FL 33026 US

New Principal Place of Business:

Current Mailing Address:

1861 NW 123 AVENUE
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-1066145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HEIL, TIMOTHY
1861 NW 123 AVENUE
PEMBROKE PINES, FL 33026 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: MGR () Delete
Name: WADE, BONITA C
Address: 8250 SW 86 CT
City-St-Zip: MIAMI, FL 33143

Title: MGR () Delete
Name: WADE, MALCOM S JR
Address: 209 RIDGEWOOD AVE
City-St-Zip: CLEWISTON, FL 33440

ADDITIONS/CHANGES:

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

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

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 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: BONITA WADE

MGR

05/01/2006

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