## 2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE: \_\_\_\_\_\_

## Apr 21, 2006 8:00 am Secretary of State **DOCUMENT #L01000013078** 04-21-2006 90020 010 \*\*\*\*50.00 MWC CAPITAL PARTNERS, L.L.C. Principal Place of Business Mailing Address 1206 EAST RIDGEWOOD STREET PO BOX 8700 ORLANDO, FL 32803 WINTER PARK, FL 32790 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03292006 Chg-LLC CR2E083 (11/05) Applied For City & State 4. FEI Number City & State 59-3732190 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHRISTY, WILLIAM J Street Address (P.O. Box Number is Not Acceptable) 2351 VIA TUSCANY WINTER PARK, FL 32789 City Zip Code FL 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 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, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MEL TITLE MGR Delete TITLE Change Addition Christon N 2351 VINTUSCONN CHRISTY, M NAME PO BOX 8700 STREET ADDRESS STREET ADDRESS WINTER PARK, FL 32790 CITY-ST-ZIP CITY-ST-ZIP winter Park, FC 3218° MGR MGR ☐ € hange TITLE Delete TITLE ☐ Addition 2301 Varuscon 1 CHRISTY, W NAME PO BOX 8700 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINER PARK, FL 32790 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 11. 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 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 tryistee empowered to execute this report as required by Chapter 608, Florida Statutes.

NING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

**FILED** 



March 17, 2006

Z0034166 #L01000013078

Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: Annual Business Report for MWC Capital Partners, L.L.C.

Dear Sir or Madam:

Enclosed please find the 2006 Uniform Business Report for MWC Capital Partners, L.L.C. and a check, made payable to the Florida Department of State in the amount of fifty dollars (\$50.00).

If you have any questions regarding this filing, please contact my office.

I remain

Very truly yours,

Rebekah M. Kurdziel For the Firm

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RMK/js enclosures