2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L01000021819

1. Entity Name
LWR, L.L.C.

Principal Place of Business	Mailing Address
10720 S.W. 69TH COURT MIAMI, FL 33156	10720 S.W. 69TH COURT MIAMI, FL 33156

DO NOT WRITE IN THIS SPACE

04272006No Chg-LLC CR2E083 (11/05)

4. FEI Number
59-2740703
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCMAHON, PAUL JOSEPH
2840 S.W. THIRD AVENUE
MIAMI, FL 33129

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GOLDMAN, ANN R
STREET ADDRESS	10720 SW 69 CT.
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	MGRM
NAME	PANKEY, NANCY R
STREET ADDRESS	183 CARROLL ST
CITY-ST-ZIP	ISLAMORADA, FL 33036
TITLE	MGRM
NAME	MCMANHON, MARGARET R
STREET ADDRESS	1040 VALENCIA AVE.
CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE	MGRM
NAME	ROBERTS, WILLIAM A
STREET ADDRESS	3540 RESERVOIR RD. NW
CITY-ST-ZIP	WASHINGTON, DC 20007
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000549467
05/13/06-80022-006 50.00

DO NOT WRITE IN THIS SPACE

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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Ann Goldman 4/26/06 305-665-1074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #