2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# L02000008551

Entity Name: RENSHAW WILLIAMS FAMILY, L.L.C.

Current Principal Place of Business:

1180 SOUTH OCEAN BOULEVARD
CLOISTER DEL MAR
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

6 BITTERSWEET LANE
OLD LYME, CT 06371 US

New Mailing Address:

FEI Number: 32-0012390 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RENSHAW, DORIS K
1180 SOUTH OCEAN BOULEVARD
CLOISTER DEL MAR #7C
BOCA RATON, FL 33432 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	RENSHAW ESTATES, DORIS K	
Address:	1180 SOUTH OCEAN BLVD.	
City-St-Zip:	BOCA RATON, FL 33432	
Title:	MGR	( ) Delete
Name:	WILLIAMS, NANCY C	
Address:	6 BITTERSWEET LANE	
City-St-Zip:	OLD LYME, CT 063711600	
Title:	MGR	( ) Delete
Name:	WILLIAMS, KENNETH E	
Address:	6 BITTERSWEET LANE	
City-St-Zip:	OLD LYME, CT 063711600	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 Section 119.07(3)(i), 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: KENNETH E. WILLIAMS MGR 01/27/2005

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