

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016898

**FILED**  
**Mar 25, 2009**  
**Secretary of State**

**Entity Name:** L-P-W DEVELOPMENT GROUP, LLC

**Current Principal Place of Business:**

1909 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

12531 WEST HWY. 71  
STE 2310  
AUSTIN, TX 78738

**New Mailing Address:**

11612 PINYON PLACE  
THE WOODLANDS, TX 77380

**FEI Number:** 30-0097138

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POPE, BERT S  
1909 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308 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:** MGMR ( ) Delete  
**Name:** WOLFE, WALTER H JR.  
**Address:** 12531 WEST HWY. 71, STE 2310  
**City-St-Zip:** AUSTIN, TX 78738

**ADDITIONS/CHANGES:**

**Title:** MGMR (X) Change ( ) Addition  
**Name:** WOLFE, WALTER H JR.  
**Address:** 11612 PINYON PLACE  
**City-St-Zip:** THE WOODLANDS, TX 77380

I hereby certify that the information supplied with this filing does not qualify 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:** WALTER H WOLFE JR

MGMR

03/25/2009

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