

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000001195

Entity Name: FWC REAL ESTATE, L.L.C.

FILED
Jun 13, 2006
Secretary of State

Current Principal Place of Business:

521 WEST STATE ROAD 434
SUITE 301
LONGWOOD, FL 32750

New Principal Place of Business:

210 RINEHART RD.
SUITE 1000
LAKE MARY, FL 32746

Current Mailing Address:

521 WEST STATE ROAD 434
SUITE 301
LONGWOOD, FL 32750

New Mailing Address:

210 RINEHART RD.
SUITE 1000
LAKE MARY, FL 32746

FEI Number: 20-0559455 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:

FRIEDMAN, MICHAEL D M.D.
521 WEST STATE ROAD 434
SUITE 301
LONGWOOD, FL 32750 US

Name and Address of New Registered Agent:

FRIEDMAN, MICHAEL D M.D.
210 RINEHART RD.
SUITE 1000
LAKE MARY, FL 32746 US

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: MICHAEL D. FRIEDMAN, M.D.

06/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FRIEDMAN, MICHAEL D MD
Address: 521 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

Title: MGR () Delete
Name: WITTEN, CHARLES N MD
Address: 521 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

Title: MGR () Delete
Name: CANGIANO, THOAMS MD
Address: 521 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FRIEDMAN, MICHAEL D MD
Address: 210 RINEHART RD.
City-St-Zip: LAKE MARY, FL 32746

Title: MGR (X) Change () Addition
Name: WITTEN, CHARLES N MD
Address: 210 RINEHART RD.
City-St-Zip: LAKE MARY, FL 32746

Title: MGR (X) Change () Addition
Name: CANGIANO, THOAMS MD
Address: 210 RINEHART RD.
City-St-Zip: LAKE MARY, FL 32746

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: MICHAEL D. FRIEDMAN, M.D.

MGR

06/13/2006

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