## 2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT				_
DOCUMENT # L03000024199				'FILED
1. Entity Name J.W.W. HOLDINGS, L.L.C.			06 MAY 16 AM 10: 34	
	•			
Principal Plac	•	Mailing Address	<u> </u>	SECRETARY OF STATE TALLAHASSEE, FEORIDA
265 KOLLEN HOLLAND, M	I PARK DRIVE II 49423	265 KOLLEN PARK DRIVE Holland, mi 49423		
				)
			,	03232006No Chg-LLC CR2E083 (11/05)
L	O NOT WRITE	IN THIS SPA	CE	4. FEI Number Applied For 38-2392811 No. Applicable
ī				5 Certificate of Status Desired \$5.00 Additional
-	6. Name and Address of Current R	egistered Agent		Fee Required
CDARVI	AVA/RENCE E III			
CRARY, LAWRENCE E III 555 COLORADO AVENUE, SUITE 1				DO NOT WRITE
STUART, FL 34994				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 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				<b>500075656875</b> 06/02/0601011003 **250.00
9.	MANAGING MEMBER	S/MANAGERS		V 200
TITLE NAME	MGRM WALSH, JOSEPH W		ľ ,	
STREET ADDRESS	265 KOLLEN PARK DRIVE		I &	B5/24
CITY-ST-ZIP TITLE	HOLLAND, MI 49423		<b>┤</b>	,
NAME	·		'	
STREET ADDRESS CITY-ST-ZIP	-			en e
TITLE NAME				
STREET ADDRESS				DO NOT WRITE
CITY-ST-ZIP			1	IN THIS SPACE
NAME			IN THIS SPACE	
STREET ADDRESS CITY-ST-ZIP			<u> </u>	
TITLE NAME				
STREET ADDRESS				
CITY-ST-ZIP			-	
NAME				
STREET ADDRESS CITY-ST-ZIP				*** *

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.

Joe Walsh

4/24/06

Date

616-392-2958

Daytime Phone #

SIGNATURE: JOE WAL SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE