

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000033404			
1. Entity Name GWW PROPERTIES, LLC			
Principal Place of Business 144 S ARLINGTON RD STE 1 JACKSONVILLE FL 32216		Mailing Address 144 S ARLINGTON RD STE 1 JACKSONVILLE FL 32216	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent AKEL, DANIEL D ONE INDEPENDENT DRIVE, SUITE 2301 JACKSONVILLE FL 32202-5059		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006			



1st MOORE CR2E083 (10/05)

4. FEI Number **81-0630532** Applied For ☐ Not Applied ☐

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

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WARREN, G. WAYNE 3156 BROUGHAM AVENUE JACKSONVILLE FL 32246 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	000000466886 03/23/06-80028-009 50.00 ☐ Change ☐ Add
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Add

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *G Wayne Warren*

3-8-06