


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000036154 1. Entity Name SWS ENTERPRISES, LLC	
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Principal Place of Business 1512 BLOUNSTOWN ST TALLAHASSEE, FL 32304	Mailing Address 1512 BLOUNSTOWN ST TALLAHASSEE, FL 32304
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DO NOT WRITE IN THIS SPACE



01252006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 90-0113331	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SAPP, SCOTT W 2019 MARYELLEN DR. TALLAHASSEE, FL 32303

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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 Scott W. Sapp MGRM (NOTE: Registered Agent signature required when reinstating) DATE 2/15/06

Filing Fee is \$50.00
Due by May 1, 2006

000000445289
03/07/06-80037-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAPP, SCOTT W 2019 MARYELLEN DR. TALLAHASSEE, FL 32303
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IN THIS SPACE**

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 605, Florida Statutes.

SIGNATURE Scott W. Sapp MGRM DATE 2/15/06 (888) 578-6666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE