

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040475

Entity Name: BCW MANAGEMENT, LLC

FILED  
Apr 25, 2005  
Secretary of State

## Current Principal Place of Business:

10-5 DEER PATH  
MAYNARD, MA 01754 US

## New Principal Place of Business:

## Current Mailing Address:

10-5 DEER PATH  
MAYNARD, MA 01754 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

MARK, HANSON  
210 WOODVIEW WAY  
BRADENTON, FL 34202 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: MARK HANSON

04/25/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: WYMAN, BRUCE C  
Address: 10-5 DEER PATH  
City-St-Zip: MAYNARD, MA 01754 US

Title: MGR ( ) Delete  
Name: WYMAN, BARBARA M  
Address: 10-5 DEER PATH  
City-St-Zip: MAYNARD, MA 01754 US

Title: MGR ( ) Delete  
Name: KINKADE, LAUREL  
Address: 11009 SUMMER DRIVE  
City-St-Zip: TAMPA, FL 33624 US

Title: MGR ( ) Delete  
Name: MISSELHORN, HELEN H  
Address: 7131 SONORA AVE  
City-St-Zip: NEWPORT RICHEY, FL 34653 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRUCE C WYMAN

MGR

04/25/2005

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