

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000004425

1. Entity Name
CMW MARKETING LLC



Principal Place of Business
3314 HENDERSON BLVD
SUITE 100-C
TAMPA, FL 33609 US

Mailing Address
3314 HENDERSON BLVD
SUITE 100-C
TAMPA, FL 33609 US



01022007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0603748	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

YOUNG, DONALD C III
2302 SAN JOSE CIRCLE
TAMPA, FL 33629

**DO NOT WRITE
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)

**Filing Fee is \$50.00
Due by May 1, 2007**

000000614058
02/06/07-80010-009 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	YOUNG, DONALD C III
STREET ADDRESS	2302 SAN JOSE CIRCLE
CITY-ST-ZIP	TAMPA, FL 33629

TITLE	MGR
NAME	YOUNG, ANNA C
STREET ADDRESS	2302 SAN JOSE CIRCLE
CITY-ST-ZIP	TAMPA, FL 33629

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

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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 608, Florida Statutes.

SIGNATURE: X

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

X MANAGER

X 1/29/07 X 813-251-111

Date

Daytime Phone #