

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90155 043 ****50.00

DOCUMENT # L04000008579 1. Entity Name SHAW G STREET PROPERTIES, LLC	
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Principal Place of Business 1862 CARIBBEAN ROAD W. WEST PALM BEACH, FL 33406	Mailing Address 1862 CARIBBEAN ROAD W. WEST PALM BEACH, FL 33406
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DO NOT WRITE IN THIS SPACE



01162006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 02-0717562	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent DONEY, WILLIAM P ESQ. C/O VANCE, DONEY & MACGIBBON, P.A. 1665 PALM BEACH LAKES BLVD., SUITE 610 WEST PALM BEACH, FL 33401

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>	DATE _____
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**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAW, CHARLEES F 1862 CARIBBEAN ROAD W. WEST PALM BEACH, FL 33406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAW, GLORIA S 1862 CARIBBEAN ROAD W. WEST PALM BEACH, FL 33406
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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: <u>Charles F. Shaw</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date <u>1-18-06</u> <small>Date</small>	Daytime Phone # <u>967-1407 313-1308</u> <small>Daytime Phone #</small>
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CHARLES F. SHAW