2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# L04000020597

Entity Name: SP & BW, LLC

Current Principal Place of Business:

220 VINTAGE CIRCLE, B 305
NAPLES, FL 34119

New Principal Place of Business:

9136 GULF SHORE DRIVE
NAPLES, FL 34108

Current Mailing Address:

220 VINTAGE CIRCLE, B 305
NAPLES, FL 34119

New Mailing Address:

9136 GULF SHORE DRIVE
NAPLES, FL 34108

FEI Number: 20-1044582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAGUNI, SEBASTIAN J
220 VINTAGE CIRCLE, B 305
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

NOVATT, JEFF M ESQ.
821 FIFTH AVENUE SOUTH
SUITE 201
NAPLES, FL 34102 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: JEFF M. NOVATT, ESQ. 04/25/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: S.J.P.J.R., L.L.C.,
Address: 220 VINTAGE CIRCLE, B 305
City-St-Zip: NAPLES, FL 34119

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: S.J.P.J.R., L.L.C.,
Address: 1936 GULF SHORE DRIVE
City-St-Zip: NAPLES, FL 34108

Title: MGRM ( ) Change (X) Addition
Name: BEWE INVESTMENTS, LT, D.
Address: 1936 GULF SHORE DRIVE
City-St-Zip: NAPLES, FL 34108

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: SEBASTIAN PAGUNI MGRM 04/25/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date