

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

DOCUMENT # L04000041269

1. Entity Name
CWB INVESTMENT GROUP LLC



Principal Place of Business
825 S. GULFVIEW BLVD
#105
CLEARWATER BEACH, FL 33767

Mailing Address
825 S. GULFVIEW BLVD
#105
CLEARWATER BEACH, FL 33767



02152006 No Chg-LLC

CR2ED83 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1274347

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCGUNIGAL, HARRY A
825 S. GULFVIEW BLVD.
#105
CLEARWATER BEACH, FL 33767

**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 re-installing)

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

000000045371
03/07/06-80041-020 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
MGRM
MCGUNIGAL, HARRY A
STREET ADDRESS
825 S. GULFVIEW BLVD. #105
CITY- ST- ZIP
CLEARWATER BEACH, FL 33767

TITLE
NAME
MGRM
MCGUNIGAL, ANTHONY J
STREET ADDRESS
199 14TH STREET NE #1408
CITY- ST- ZIP
ATLANTA, GA 30309

TITLE
NAME
MGRM
WALTERS, ANN M
STREET ADDRESS
4974 HIGHLAND OAKS WAY
CITY- ST- ZIP
MABLETON, GA 30126

TITLE
NAME
MGRM
WALTERS, JAMES B
STREET ADDRESS
4974 HIGHLAND OAKS WAY
CITY- ST- ZIP
MABLETON, GA 30126

TITLE
NAME
MGRM
SHAH, NANDAN J
STREET ADDRESS
111 E. CHESTNUT STREET #17C
CITY- ST- ZIP
CHICAGO, IL 60611

TITLE
NAME
MGRM
SHAH, VANDANA J
STREET ADDRESS
211 TIMBERCREST LANE
CITY- ST- ZIP
SCHAUMBURG, IL 60193

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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:

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

Date

Daytime Phone #

2/19/06 404-386-9575