

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069680

Entity Name: L & W CAPITAL LLC

FILED  
Apr 25, 2005  
Secretary of State

**Current Principal Place of Business:**

5300 W CYPRESS ST  
SUITE 247  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 20532  
TAMPA, FL 33607 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAFATA, JOSEPH S CPA  
5300 W CYPRESS STREET  
SUITE 247  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: LAFATA, JOSEPH S  
Address: 5300 W CYPRESS ST STE 247  
City-St-Zip: TAMPA, FL 33607 US

Title: MGRM ( ) Delete  
Name: WOODS, DEBORAH K  
Address: 1140 WYNDHAM LAKES DRIVE  
City-St-Zip: ODESSA, FL 33556 US

**ADDITIONS/CHANGES:**

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: JOSEPH S LAFATA

MGRM

04/25/2005

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