2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073167

Entity Name: MSW HOLDINGS, LLC

Address:

City-St-Zip:

P.O. BOX 265

CLEWISTON, FL 33440

FILED Mar 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 W. SUGARLAND HWY CLEWISTON, FL 33440 **Current Mailing Address: New Mailing Address:** PO BOX 265 CLEWISTON, FL 33440 FEI Number: 55-0884995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, GLENN A 116 W. CIRCLE DR. CLEWISTON, FL 33440 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SMITH, GLENN A Name: Name: Address: 116 W CIRCLE DR. Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WALKER, LUAN B Name: Address: 708 ROYAL PALM BLVD. Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WALKER, SAMUEL J Name: Name: Address: 708 ROYAL PALM BLVD. Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition MCCALLUM, JOHN T Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: JOHN T MCCALLUM MRGM 03/27/2008