


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000084060 1. Entity Name GWTHC, LLC	
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Principal Place of Business 1637 N. MILWAUKEE AVENUE CHICAGO, IL 60647	Mailing Address 1658 N. MILWAUKEE AVENUE, BOX 266 CHICAGO, IL 60647
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SEIDER, WILLIAM M 200 S. ORANGE AVENUE SARASOTA, FL 34236
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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.

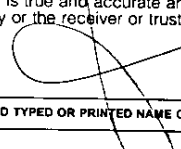
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$50.00
Due by September 6, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KINNKE, MATTHEW R 1637 N MILWAUKEE CHICAGO, IL 60647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KINNKE, COLIN M 1637 N MILWAUKEE CHICAGO, IL 60647
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
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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:  COLIN M. KINNKE 7/10/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE _____ Date _____ Daytime Phone # _____

FILED
06 JUL 17 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07102006No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

8/30/19

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07/21/06--01009--013 **450.00