

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088093

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: HWS, LLC

## Current Principal Place of Business:

5760 NE 61ST AVE. ROAD  
SILVER SPRINGS, FL 34488

## New Principal Place of Business:

5760 NE 61 AVE. ROAD  
SILVER SPRINGS, FL 34488

## Current Mailing Address:

P.O. BOX 125  
SILVER SPRINGS, FL 34489

## New Mailing Address:

FEI Number: 22-3904454      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

AMMERMAN, MARY  
5760 NE 61ST AVE. ROAD  
SILVER SPRINGS, FL 34488      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/MANAGERS:

Title: MGRM ( ) Delete  
Name: AMMERMAN, WILLIAM  
Address: 5760 NE 61ST AVE. ROAD  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: MGR ( ) Delete  
Name: LAJZA, EDWARD  
Address: 159 HICKORY STICK CT.  
City-St-Zip: DEBARY, FL 32713

Title: MGR ( ) Delete  
Name: BLOM, ROBERT  
Address: 1615 BEECH HOLLOW LANR  
City-St-Zip: SOUTHSIDE, AL 35907

Title: MGR ( ) Delete  
Name: PATRICK, SULLIVAN  
Address: 6105 MASTERS BLVD.  
City-St-Zip: ORLANDO, FL 32819 43

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: AMMERMAN, WILLIAM  
Address: 5760 NE 61 AVE. ROAD  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: PATRICK, SULLIVAN  
Address: 115 CROSS CREEK LANE  
City-St-Zip: GADSDEN, AL 35901

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.

SIGNATURE: WILLIAM AMMERMAN

MGRM

04/14/2008

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