

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088129

Entity Name: CWMC, LLC

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

1330 SOUTH FORT HARRISON AVE
CLEARWATER, FL 33756

New Principal Place of Business:

Current Mailing Address:

1330 SOUTH FORT HARRISON AVE
CLEARWATER, FL 33756

New Mailing Address:

FEI Number: 22-3905743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTU, DAVID O
25400 US HIGHWAY 19 N. , SUITE 116
CLEARWATER, FL 33763 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: P () Delete
Name: ALIDINA, ARIF
Address: 3513 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

Title: VP () Delete
Name: COHEN, LANCE
Address: 1785 MCCAULEY ROAD
City-St-Zip: CLEARWATER, FL 33765

Title: MAN () Delete
Name: FRANKS, MICHAEL
Address: 1330 SOUTH FORT HARRISON AVE
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES:

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

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 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: MICHAEL FRANKS

MAN

02/24/2009

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