2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2007
Secretary of State

DOCUMENT# L05000007795

Entity Name: NWA INVESTORS I, LLC

Current Principal Place of Business:

C/O RALPH M. LONG
548 CASCADE FALLS DRIVE
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

210 CORAL WAY STE. 202
MIAMI, FL 33145

New Mailing Address:

548 CASCADE FALLS DR.
WESTON, FL 33327

FEI Number: 20-2232801 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONG, RALPH M
548 CASCADE FALLS DRIVE
WESTON, FL 33327 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:	LONG, RALPH M	
Address:	548 CASCADE FALLS DR.	
City-St-Zip:	WESTON, FL 33327 US	
Title:	MGRM	( ) Delete
Name:	LORENTZEN, MATTHEW	
Address:	240 SANFORD AVE	
City-St-Zip:	PALM BEACH, FL 33480 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 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: RALPH LONG MGRM 02/23/2007

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