

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032392

Entity Name: 3W REALTY, LLC

FILED  
Mar 01, 2006  
Secretary of State

**Current Principal Place of Business:**

3894 HIDDEN ACRES CIRCLE  
NORHT FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

3894 HIDDEN ACRES CIRCLE  
NORHT FORT MYERS, FL 33903

**New Mailing Address:**

FEI Number: 20-2618750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WIRKA, JOHN M  
3984 HIDDEN ACRES CIRCLE  
NORTH FORT MYERS, FL 33903 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: WIRKA, JOHN M  
Address: 3894 HIDDEN ACRES CIRCLE  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: MGRM ( ) Delete  
Name: WIRKA, JAMES J  
Address: 293 EUREKA DRIVE  
City-St-Zip: ATLANTA, GA 30305

Title: MGRM ( ) Delete  
Name: WIRKA, WILLIAM J JR.  
Address: 460 LENOX STREET  
City-St-Zip: OAK PARK, IL 60302

**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 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 J. WIRKA, JR.

MGRM

03/01/2006

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