2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L05000036699

Entity Name: MRW ASSOCIATES, LLC

Current Principal Place of Business:

1985 SR 419
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

1985 SR 419
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 20-2682368 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROMINGER, STEPHEN L
1985 SR 419
LONGWOOD, FL 32750 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: MGR ( ) Delete
Name: ROMINGER, STEPHEN L
Address: 461 VALLEY STREAM DR
City-St-Zip: GENEVA, FL 32732

Title: MGR ( ) Delete
Name: MAIDEN, DARYL C
Address: 582 IVANHOE PLAZA
City-St-Zip: ORLANDO, FL 32804

Title: MGR ( ) Delete
Name: WILSON, CHARLIE A
Address: 28633 COUNTY ROAD 46A
City-St-Zip: SORRENTO, FL 32776

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: CHARLIE ANN WILSON MGR 03/19/2009

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