

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90044 018 \*\*\*\*50.00

**DOCUMENT # L05000039513**

1. Entity Name  
**A & W PROPERTIES II, LLC**



Principal Place of Business  
**1474 JORDAN HILLS COURT  
CLEARWATER, FL 33756**

Mailing Address  
**1474 JORDAN HILLS COURT  
CLEARWATER, FL 33756**

2. Principal Place of Business

**4250 Central Avenue**

3. Mailing Address

**4250 Central Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**St. Petersburg FL**

City & State

**St. Petersburg FL**

Zip

**33711**

Country

**USA**

Zip

**33711**

Country

**USA**

03292006

Chg-LLC

CR2E083 (11/05)

4. FEI Number

**20-3067148**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BRUNSON, JOHN MORGAN ESQ  
1474 JORDAN HILLS COURT  
CLEARWATER, FL 33756**

7. Name and Address of New Registered Agent

Name  
**Brunson, John Morgan, Esq.**  
Street Address (P.O. Box Number is Not Acceptable)  
**4250 Central Avenue**

City  
**St. Petersburg**

FL

Zip Code  
**33711**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*John Morgan Brunson*

**John Morgan Brunson**

**3-30-06**

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
MOOTZ, MATTHEW T  
1474 JORDAN HILLS COURT  
CLEARWATER, FL 33756** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
BRUNSON, JOHN MORGAN  
1474 JORDAN HILLS COURT  
CLEARWATER, FL 33756** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
Mootz, Matthew T.  
4250 Central Avenue  
St. Petersburg FL 33711** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
Brunson John Morgan  
4250 Central Avenue  
St. Petersburg FL 33711** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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

*John Morgan Brunson*

**John Morgan Brunson**

**3-30-06**

**(727) 828-0580**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #