2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083648

Entity Name: SLLW, LLC

FILED Apr 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

912 EASTWOOD DR BRANDON, FL 33511 US

Current Mailing Address: New Mailing Address:

P O BOX 6035

BRANDON, FL 33508 US

FEI Number: 20-3353076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AMES, ANDREW T CPA, CFP LUSTIG-WITTERS, LINN 128 W OAK STREET 912 EASTWOOD DR. ARCADIA, FL 34266 BRANDON, FL 33511 US

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: LINN LUSTIG-WITTERS 04/04/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change () Addition () Delete

LUSTIG, LINN LUSTIG-WITTERS, LINN Name: Name:

Address: P O BOX 6035 Address: P O BOX 6035 BRANBON, FL 33508 US BRANBON, FL 33508 US

City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

Name: LUSTIG, LINN Name: LUSTIG-WITTERS, LINN Address: P O BOX 6035 Address: P O BOX 6035

City-St-Zip: BRANDON, FL 33508 US City-St-Zip: BRANDON, FL 33508 US

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: LINN LUSTIG-WITTERS **MGRM** 04/04/2007