2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L05000089650

Entity Name: C & W PARTNERS, LLC

Current Principal Place of Business:

101 SOUTH F STREET
PENSACOLA, FL 32501

New Principal Place of Business:

101 SOUTH F STREET
PENSACOLA, FL 32502

Current Mailing Address:

101 SOUTH F STREET
PENSACOLA, FL 32501

New Mailing Address:

101 SOUTH F STREET
PENSACOLA, FL 32502

FEI Number: 20-3459822 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORDES, REBECCA L
101 SOUTH F STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

CORDES, REBECCA L
101 SOUTH F STREET
PENSACOLA, FL 32502 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: _____ 04/29/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CORDES, REBECCA L
Address: 101 SOUTH F STREET
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM ( ) Delete
Name: WHITE, PAUL F
Address: 101 SOUTH F STREET
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CORDES, REBECCA L
Address: 101 SOUTH F STREET
City-St-Zip: PENSACOLA, FL 32502

Title: MGRM (X) Change ( ) Addition
Name: WHITE, PAUL F
Address: 101 SOUTH F STREET
City-St-Zip: PENSACOLA, FL 32502

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: R L CORDES MGRM 04/29/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date