

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093330

Entity Name: MRW, LLC

FILED  
Apr 17, 2009  
Secretary of State

**Current Principal Place of Business:**

22014 SUNNYSIDE LANE  
PANAMA CITY BEACH, FL 324131252

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22456  
SAVANNAH, GA 31403

**New Mailing Address:**

FEI Number: 20-3524179

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WIGGINS, WALLACE  
22014 SUNNYSIDE LANE  
PANAMA CITY BEACH, FL 324131252 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: WIGGINS, WALLACE MR  
Address: 1604 STANFORD DRIVE  
City-St-Zip: STATESBORO, GA 30461

Title: MGRM ( ) Delete  
Name: ROESEL, PAUL MR  
Address: 3302 ZELL MILLER PARKWAY  
City-St-Zip: STATESBORO, GA 30458

Title: MGRM ( ) Delete  
Name: MOCK, WILLIAM H MR  
Address: P.O. BOX 22456  
City-St-Zip: SAVANNAH, GA 31403

**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: WALLACE WIGGINS

MGRM

04/17/2009

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