


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 24, 2007-08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000114700</b> 1. Entity Name AAW, LLC	
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Principal Place of Business 2603 S.E. 17TH STREET SUITE A OCALA, FL 34471 US	Mailing Address 2603 S.E. 17TH STREET SUITE A OCALA, FL 34471 US
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01112007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-3952555	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  WIECHENS, CHRISTOPHER S 2603 S.E. 17TH STREET SUITE A OCALA, FL 34471	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_  
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, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VANSAN, LLC 2603 S.E. 17TH STREET, SUITE A OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ALVAREZ, JOHN 3910 S.W. COLLEGE ROAD, SUITE 201 OCALA, FL 34474
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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:**  **Christopher S. Wiechens** 1/22/07 352-622-3214  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #