### 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000118184

1. Entity Name BWB INVESTMENTS, LLC

FILED Apr 27, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

625 E.TWIGGS ST.

TAMPA, FL 33602

625 E.TWIGGS ST.

SUITE 100

SUITE 100

TAMPA, FL 33602 US



#### DO NOT WRITE IN THIS SPACE

03082006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3929471

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WEINSTEIN, DAVID B 625 E. TWIGGS ST. SUITE 100 TAMPA, FL 33602

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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, 2006

| TITLE MGRM  NAME WEINSTEIN, DAVID B  STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  ITILE MGRM  NAME BALES, JOHN C  STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  ITILE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP                                                             | 9,             | MANAGING MEMBERS/MANAGERS    |
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| STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  ITILE MGRM BALES, JOHN C STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  ITILE NAME STREET ADDRESS | TITLE          | MGRM                         |
| CITY-ST-ZIP TAMPA, FL 33602  IITLE MGRM SALES, JOHN C STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  IITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  ITTLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                               | NAME           | WEINSTEIN, DAVID B           |
| ITILE NAME STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33602  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                                                                                                                                                                                                                      | STREET ADDRESS | 625 E. TWIGGS ST., SUITE 100 |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                       | CITY-ST-ZIP    | TAMPA, FL 33602              |
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| CITY-ST-ZIP  TAMPA, FL 33602  ITILE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                            | NAME           | BALES, JOHN C                |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                   | STREET ADDRESS | 625 E. TWIGGS ST., SUITE 100 |
| NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                 | CITY-ST-ZIP    | TAMPA, FL 33602              |
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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:

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

4/26/06

6.3-60