20	07 LIMITED LIA ANNUAL RE			FILED Feb 22, 2007 8:00 am
DOCUMENT # L06000017938				Secretary of State
MACRO,	LLC			02-22-2007 90280 017 ****50.00
Principal Place of Business		Mailing Address		
3501 SW CORPORATE PKWY PALM CITY FL 34990		3501_SW CORPORATE PKWY>		
2. Principal Place of Business - No P.O. Box # 4207 Sw High Merdon Suite, Apt. #, etc.		3. Mailing Address 4207 Sw High Meadle Suile, Apl. #, etc.		1st MOORE CR2E083 (10/06)
Palm City, FL		Palm City	,FL	4. FEI Number Applied For 7 20 - 43403_50 Not Applicable
Zip 34990 Marth 3499		Zip 34990	Marth	5. Certificate of Status Desired Status Desired Fee Required
6. Name and Address of Current Registered Agent Name				7. Name and Address of New Hegistered Agent
108	LAND, RONALD D 3 SW PIGEON PLUM WAY M CITY FL 34990		Street A	ddress (P.O. Box Numbor is Not Acceptable)
FAL				
8. The above named entity submits this statement for the purpose of changing it			City	FL Zip Code
	ions of registered agent.		-	
<u>_</u>	Signature, typed or primed name of registered agent and		WIII FEE IS \$	are required when reinstaling} CATE
	<u> </u>	Make Check Payable		artment of State
9. RITLE		S/MANAGERS	10. TITLE	
NAME STREET ADDRESS CITY - ST - ZIP	KWH HOLDINGS, INC 3501 SW CORPORATE PKWY PALM CITY FL 34990		NAME STREET ADDRESS CITY-ST-ZIP	KWM Holdings, The. 4207 SW High Meadow Palm (the FL 34990
IIILE	MGRM	Delete	HRE	Parm C: Vy FL S4770
NAMI: Strfet address City - St- Zip	ROLAND INVESTMENTS, INC. 1083 SW PIGEON PLUM WAY PALM CITY FL 34990		NAME STREELADDRESS CITY-ST-ZIP	
TITLE		Delete	TITLE NAME	Change Addition
STREET ADDRESS City - St - Zip	· ·	• • • •	STREET ADDRESS City - St - Zip	
TELE NAME STREET ADORESS CITY - ST- ZIP		Delete	TITLE. NAME STREET ADDRESS CHTY-S1-ZIP	Change Addition
HILE NAME STREET ADDRESS CHY+ST-ZIP		🗌 Deleie	IIIII NAME STREET ADDRESS CITY+SI-ZIP	Change 🗋 Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	HILL NAME STRIELADORESS CITY-ST-ZIP	Change Addition
indicated	certify that the information supplied with on this report is true and accurate and t bility company or the receiver or trustee	hat my signature shall have	the same legal el report as required	
SIGNATURE: Kully W. M. Dintyne HOR Molling 1/28/07 772-215-4471 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, WANAGER, OR AUTHORIZED REPRESENTATIVE Day Day Daytore Phone #				

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