# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 25, 2007**
**Secretary of State**

DOCUMENT# L06000046737

**Entity Name:** TWE, LLC

**Current Principal Place of Business:**

1050 CORPORATE AVENUE, SUITE 105
NORTH PORT, FL 34289

**New Principal Place of Business:**

474 TAMIAMI TRAIL
UNIT 4
PORT CHARLOTTE, FL 33953 US

**Current Mailing Address:**

1050 CORPORATE AVENUE, SUITE 105
NORTH PORT, FL 34289

**New Mailing Address:**

474 TAMIAMI TRAIL
UNIT 4
PORT CHARLOTTE, FL 33953 US

**FEI Number: 20-4837116** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

O'LEARY, D. MICHAEL
101 E. KENNEDY BLVD., SUITE 2700
TAMPA, FL 33602 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: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PD ( ) Change (X) Addition
Name: ELMY, TERRI W
Address: 474 TAMIAMI TRAIL #4
City-St-Zip: PORT CHARLOTTE, FL 33953

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: TERRI W ELMY PD 04/25/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date