

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000087212

FILED  
Apr 10, 2008  
Secretary of State

Entity Name: M.A.WARD ENTERPRISES, LLC.

**Current Principal Place of Business:**

350 TALL PINES ROAD  
SUITE J  
WEST PALM BEACH, FL 33413 US

**New Principal Place of Business:**

**Current Mailing Address:**

12064 62ND LANE NORTH  
WEST PALM BEACH, FL 33412 US

**New Mailing Address:**

FEI Number: 20-5502105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WARD, MICHAEL A  
350 TALL PINES ROAD  
SUITE J  
WEST PALM BEACH, FL 33413 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: MGR ( ) Delete  
Name: WARD, MICHAEL A  
Address: 350 TALL PINES ROAD, UNIT 350J  
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: MGR ( ) Delete  
Name: WARD, JUDITH L  
Address: 350 TALL PINES ROAD, UNIT 350J  
City-St-Zip: WEST PALM BEACH, FL 33413 US

**ADDITIONS/CHANGES:**

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: MICHAEL A. WARD

MGR

04/10/2008

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