

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000094167

Entity Name: LRW, LLC

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

181 S.E. HARBOR POINT DRIVE  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

181 S.E. HARBOR POINT DRIVE  
STUART, FL 34996

**New Mailing Address:**

FEI Number: 65-1295753

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KRAMER, ROBERT S  
853 S.E. MONTEREY COMMONS BLVD.  
STUART, FL 34996 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: MGRM  
Name: LOYOLA, RENE  
Address: 1825 S.E. TIFFANY AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGRM  
Name: RITTERSBACH, GEORGE H JR.  
Address: 1825 S.E. TIFFANY AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGRM  
Name: WENGLER, W. EDWARD  
Address: 1825 S.E. TIFFANY AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34952

I hereby 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: W.EDWARD WENGLER MD

MGRM

03/18/2010

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