

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000001799

Entity Name: CWR, LLC

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

215 EAST BURLEIGH BOULEVARD  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1862  
MT. DORA, FL 32756

**New Mailing Address:**

215 EAST BURLEIGH BOULEVARD  
TAVARES, FL 32778

FEI Number: 90-0296056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMLEY, AVERI C  
215 E BURLEIGH BLVD  
TAVARES, FL 32778 US

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

REINERTSEN, CHARLES W  
215 E BURLEIGH BLVD  
TAVARES, FL 32778 US

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: CHARLES W. REINERTSEN

02/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: REINERTSEN, CHARLES W  
Address: 215 EAST BURLEIGH BOULEVARD  
City-St-Zip: TAVARES, FL 32778

Title: MGRM  
Name: THOMLEY, AVERI C  
Address: 1020 MARIETTA LN  
City-St-Zip: EUSTIS, FL 32726

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: CHARLES W. REINERTSEN

MGRM

02/10/2012

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