2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000007226

Entity Name: T.W.I. STONE GALLERY, LLC

18121 CRAWLEY RD.

ODESSA, FL 33556 US

Address:

City-St-Zip:

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18121 CRAWLEY RD. ODESSA, FL 33556 US **Current Mailing Address: New Mailing Address:** 18121 CRAWLEY RD. 5502 ANDERSON RD ODESSA, FL 33556 US TAMPA, FL 33614 US FEI Number: 42-1754802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLAZZA, BENEDETTO 18121 CRAWLEY RD. ODESSA, FL 33556 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PLAZZA, BENEDETTO Name: Name: Address: 18121 CRAWLEY RD. Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: PLAZZA, STEFANO Name: Address: 18121 CRAWLEY RD. Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition PLAZZA, JOHN P Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: BENEDETTO PLAZZA MGRM 04/08/2009