2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000046397

13167 SOUTH U.S. HIGHWAY 441-27

SUMMERFIELD, FL 34491 MN

Address:

City-St-Zip:

Entity Name: F.P.W.L.L.C.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	H STREET ACH, FL 32967	IR			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	TH STREET ACH, FL 32967	IR			
FEI Number	: 26-2570551	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
The above in the State	H STREET ACH, FL 32967 named entity see of Florida.		e purpose of changing its register	ed office or registered agent, or both	
SIGNATURE:Electronic Signature of Registered Agent			gent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () POWELL, RALP 6790 45TH STRI VERO BEACH, F	EET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FOX, JOHN J	Delete AST 169 TH AVE RD L 32179 MN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR (X) WASIEWICZ, KE	Delete -N	Title: Name:	() Change () Addition	

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: RALPH POWELL MGR 04/15/2009