

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L96000000718

Entity Name: MWS&S, L.C.

FILED  
Apr 29, 2006  
Secretary of State

## Current Principal Place of Business:

225 NATURE'S TRAIL  
FT. WALTON BEACH, FL 32548

## New Principal Place of Business:

## Current Mailing Address:

225 NATURE'S TRAIL  
FT. WALTON BEACH, FL 32548

## New Mailing Address:

FEI Number: 59-3388796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHOFF, CHARLES J  
225 NATURE'S TRAIL  
FT. WALTON BEACH, FL 32548 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 ( ) Delete  
Name: SHOFF, CHARLES J  
Address: 225 NATURE'S TRAIL  
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: MGR ( ) Delete  
Name: WILSON, RICHARD B JR  
Address: 37149 WILD ROSE LANE  
City-St-Zip: MURRIETA, CA 92562

Title: MGR ( ) Delete  
Name: SING, MICHAEL L  
Address: 6527 EL NIDE DR  
City-St-Zip: MCLEAN, VA 22101

Title: MGRM ( ) Delete  
Name: MANION, LISA M  
Address: 2025 SHORTLINE DR  
City-St-Zip: MONTGOMERY, AL 36116

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: CHARLES J. SHOFF

MGRM

04/29/2006

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