2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L98000002375

1. Entity Name

W-B REALTY HOLDINGS, L.C.



FILED Mar 12, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

114 ANNAPOLIS STREET ANNAPOLIS, MD 21401

US

114 ANNAPOLIS STREET

ANNAPOLIS, MD 21401

US



03022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
05-0501384 Applied For
Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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Control	1011,112 00024	IN TH	IIS SPACE
	named entity submits this statement for the purpose of chanions of registered agent.	iging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
Fi	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
NAME STREET ADDRESS CITY-ST-ZIP	MGR BURRUSS, WILLIAM F JR. 114 ANNAPOLIS STREET ANNAPOLIS, MD 21401		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000662619 03/21/07-80020-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO N	OT WRITE
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TITLE NAME STREET ADDRESS CITY-SY-ZIP		, ,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	· , ,
11. I hereby indicated limited lia	certify that the information supplied with this filing does not on this report is true and accurate and that my signature sl sbillity company or the receiver or trustee empowered to exe-	qualify for the exemptions contained in Chapter 119, Fit half have the same legal effect as if made under oath; cute this report as required by Chapter 608, Florida Sta	orida Statutes. I further certify that the information that I am a managing member or manager of the alutes.