

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005766

Entity Name: IIW LLC

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

767 LITCHFIELD ROAD
TALLAHASSEE, FL 32312

New Principal Place of Business:

122 WIREGRASS LANE
QUINCY, FL 32351

Current Mailing Address:

767 LITCHFIELD ROAD
TALLAHASSEE, FL 32312

New Mailing Address:

122 WIREGRASS LANE
QUINCY, FL 32351

FEI Number: 59-3597482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JERRY LEE INGLE
767 LITCHFIELD ROAD
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

JERRY LEE INGLE
122 WIREGRASS LANE
QUINCY, FL 32351 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: JERRY INGLE

04/30/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: JERRY LEE INGLE,
Address: 767 LITCHFIELD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: WATERS, CYNTHIA L
Address: 767 LITCHFIELD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JERRY LEE INGLE,
Address: 122 WIREGRASS LANE
City-St-Zip: QUINCY, FL 32351

Title: MGRM (X) Change () Addition
Name: WATERS, CYNTHIA L
Address: 122 WIREGRASS LANE
City-St-Zip: QUINCY, FL 32351

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JERRY INGLE

MGRM

04/30/2004

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