## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRI

## FILED Apr 02, 2004 8:00 am Secretary of State

614-863-6966

Daytime Phone #

04-02-2004 90253 012 \*\*\*\*50.00 DOCUMENT # M 000000 01467 1. Entity Name DWR PROPERTIES, LLC DO NOT WRITE IN THIS SPACE 24033139 2. Principal Place of Business 3. Mailing Address 850 Science Boulevard 850 Science Boulevard Suite: Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State Columbus, OH Columbus, OH 31-1463232 Not Applicable Country Country Zip Zip \$5.00 Additional 5. Certificate of Status Desired 43230 USA 43230 Fee Required 7. Name and Address of Current Registered Agent Name Richard Bennett Street Address (P.O. Box Number is Not Acceptable) DO NOT WRITE 3033 Riviera Drive IN THIS SPACE Suite 201 City Zip Code Naples 34103 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE CERTE SEDED CHOCKARDADOORKAANAELO ORKARDADOORKA 9. MANAGING MEMBERS/MANAGERS TITLE Managing Member NAME DAVID W. RAMSEY NAME 643 SYCAMORE MILLS DRIVE STREET ADDRESS STREET ADDRESS GAHANNA, OH 43230 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME MAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITILE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited jability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.