


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # L04000022094 1. Entity Name WATERWAY INVESTMENT PROPERTIES, LLC |  |
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|---|---|
| Principal Place of Business 4250 CENTRAL AVE SAINT PETERSBURG, FL 33711 | Mailing Address 4250 CENTRAL AVE SAINT PETERSBURG, FL 33711 |
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04162008 No Chg-LLC CR2E083 (12/07)

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|---|---------------------------------------|
| 4. FEI Number 20-1059160 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

BRUNSON, JOHN MORGAN ESQ
 4250 CENTRAL AVE
 SAINT PETERSBURG, FL 33711

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re/instating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000936939
 05/27/08-80030-004 138.75

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR BRUNSON, JOHN MORGAN 4250 CENTRAL AVE SAINT PETERSBURG, FL 33711 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR FITZGERALD, SARAH E 4250 CENTRAL AVE SAINT PETERSBURG, FL 33711 |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: John Brunson John Brunson 4/18/08 / 727-828-0580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #