

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**


4/17/2008-90164-006-\$143.75-\$143.75

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JUN -2 PH 1:18

**DOCUMENT # L05000096274**

1. Entity Name  
**WATERTOWN REALTY OF FL, LLC**



Principal Place of Business  
**407 BATH CLUB BLVD N  
NORTH REDINGTON BEACH, FL 33708**

Mailing Address  
**407 BATH CLUB BLVD N  
NORTH REDINGTON BEACH, FL 33708**



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

04152008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
**APPLIED FOR 1-3814389**  Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**MONTAMBAULT, LYNN S  
407 BATH CLUB BLVD N  
NORTH REDINGTON BEACH, FL 33708**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 *Lynn S. Montambault* DATE 4-15-08

Signature of individual or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES			
TITLE	MGR	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MONTAMBAULT, LYNN S			NAME			
STREET ADDRESS	407 BATH CLUB BLVD N			STREET ADDRESS			
CITY-ST-ZIP	NORTH REDINGTON BEACH, FL 33708			CITY-ST-ZIP			
TITLE	MGRM	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MONTAMBAULT, EDWARD J JR.			NAME			
STREET ADDRESS	407 BATH CLUB BLVD N			STREET ADDRESS			
CITY-ST-ZIP	NORTH REDINGTON BEACH, FL 33708			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

**B. F. F. JUN 02 2008**

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: *Lynn S. Montambault* DATE 4-15-08 727-397-3300

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #