2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030424

Entity Name: TALON WATER, L.L.C.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6432 SEABREEZE AVE 18383 MABERLY ROAD SPRING HILL, FL 34607 BROOKSVILLE, FL 34614

Current Mailing Address: New Mailing Address:

6432 SEABREEZE AVE 18383 MABERLY ROAD SPRING HILL, FL 34607 BROOKSVILLE, FL 34614

FEI Number: 26-2288296 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LUCASH, KIMMARIE OWNER
6432 SEABREEZE AVE.
5PRING HILL, FL 34607 US
LUCASH, KIMMARIE OWNER
18383 MABERLY ROAD
BROOKSVILLE, FL 34614 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: KIMMARIE LUCASH 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: LUCASH, KIMMARIE Name: LUCASH, KIMMARIE

Name:LUCASH, KIMMARIEName:LUCASH, KIMMARIEAddress:6432 SEABREEZE AVEAddress:18383 MABERLY ROADCity-St-Zip:SPRING HILL, FL 34607 USCity-St-Zip:BROOKSVILLE, FL 34614 US

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 LUCASH, BERNARD P
 Name:

 Address:
 10371 FLAG ROAD
 Address:

 City-St-Zip:
 SPRING HILL, FL 34608
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: KIMMARIE LUCASH MGRM 04/30/2009