

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000105095

**Entity Name:** CREATIVE WATERWORKS, LLC

**Current Principal Place of Business:**

BOX 162533

ALTAMONTE SPRINGS, FL 32716

**Current Mailing Address:**

P.O. BOX 162533

ALTAMONTE SPRINGS, FL 32716 US

**FEI Number:** 20-3711536

**Certificate of Status Desired:** No

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

WILLIAMS, JON

BOX 162533

ALTAMONTE SPRINGS, FL 32716 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM

Name WILLIAMS, JON

Address PO BOX 162533

City-State-Zip: ALTAMONTE SPRINGS FL 32716

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JON WILLIAMS

MGRM

01/07/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date