


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2007 08:00 A
Secretary of State

DOCUMENT # L00000014630 1. Entity Name FRESH WATER PROPERTIES, L.C.	
--	---

Principal Place of Business 585 MAIN ST. STE. 201 DUNEDIN, FL 34698	Mailing Address 585 MAIN ST. STE. 201 DUNEDIN, FL 34698
--	--



01042007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 74-3045698	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 GRAHAM, THOMAS J 585 MAIN ST. STE. 201 DUNEDIN, FL 34698	DO NOT WRITE IN THIS SPACE
--	---------------------------------------

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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRAHAM, THOMAS J 585 MAIN ST., STE. 201 DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000663004
03/21/07-80035-011 50.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-8-07 727-733-9400

Date

Daytime Phone #

Thomas J. Graham, Partner