

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015956

Entity Name: FLORIDA-GEORGIA WATER, LLC

FILED  
Mar 22, 2004  
Secretary of State

**Current Principal Place of Business:**

944 W. BREVARD ST.  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

944 W. BREVARD ST.  
TALLAHASSEE, FL 32304

**New Mailing Address:**

FEI Number: 59-3691391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOWE, TODD  
944 W. BREVARD ST.  
TALLAHASSEE, FL 32304 US

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

LOGUE, TODD  
944 W. BREVARD ST.  
TALLAHASSEE, FL 32304 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: TODD LOGUE

03/22/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: P ( ) Delete  
Name: LOGUE, TODD  
Address: 944 W BREVARD ST  
City-St-Zip: TALLAHASSEE, FL 32304

Title: S ( ) Delete  
Name: HOLTZ, KEVIN  
Address: 944 W BREVARD ST  
City-St-Zip: TALLAHASSEE, FL 32304

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LOGUE, TODD  
Address: 944 W BREVARD ST  
City-St-Zip: TALLAHASSEE, FL 32304

Title: MGR (X) Change ( ) Addition  
Name: HOLTZ, KEVIN  
Address: 944 W BREVARD ST  
City-St-Zip: TALLAHASSEE, FL 32304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KEVIN HOLTZ

MGR

03/22/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date