


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90364 008 ****50.00

DOCUMENT # L02000007781 1. Entity Name ADAMS WATERFRONT INVESTMENTS, LLC	
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Principal Place of Business S/S 250 ADAMS BARN ROAD AUBURDALE, FL 33823 33850 LAKE ALFRED	Mailing Address S/S 250 ADAMS BARN ROAD AUBURDALE, FL 33823 33850 LAKE ALFRED
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04182007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1880573	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 KATZ, B. PAUL KATZ & GREEN ATRIUM SUITE, 1 FLORIDA PARK DRIVE SOUTH PALM BEACH COAST, FL	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALLEN, WILLIAM G 3129 SPRINGBANK LANE CHARLOTTE, NC 28226
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CALDWELL, ERNEST W 400 EAGLE LAKE LOOP RD. WINTER HAVEN, FL 33884
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**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: *William G. Allen*

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

Date

Daytime Phone #