2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2008
Secretary of State

DOCUMENT# L03000004084

Entity Name: WATERSTORM, LLC

Current Principal Place of Business:

445 SR 13, STE #26, PMB 393
JACKSONVILLE, FL 32259

New Principal Place of Business:

445 SR 13, STE #26, PMB 366
JACKSONVILLE, FL 32259

Current Mailing Address:

445 SR 13, STE #26, PMB 393
JACKSONVILLE, FL 32259

New Mailing Address:

445 SR 13, STE #26, PMB 366
JACKSONVILLE, FL 32259

FEI Number: 20-0891248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILKINSON, PETER D
445 SR 13, STE #26, PMB 393
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

WILKINSON, PETER D
445 SR 13, STE #26, PMB 366
JACKSONVILLE, FL 32259 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: PETER WILKINSON 02/14/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR ( ) Delete
Name: WILKINSON, PETER D
Address: 445 SR 13, STE #26, PMB 393
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES:

Title: MGMR (X) Change ( ) Addition
Name: WILKINSON, PETER D
Address: 445 SR 13, STE #26, PMB 366
City-St-Zip: JACKSONVILLE, FL 32259

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: PETER WILKINSON CEO 02/14/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date