

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jun 14, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000041861

1. Entity Name  
CALM WATER INVESTMENTS, L.L.C.



Principal Place of Business  
3685 ROYAL OAK DRIVE  
TITUSVILLE, FL 32780

Mailing Address  
3685 ROYAL OAK DRIVE  
TITUSVILLE, FL 32780



06082007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0375736

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

WALLACE, NATHANIEL  
3685 ROYAL OAK DRIVE  
TITUSVILLE, FL 32780

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate)

DATE

**Filing Fee is \$50.00  
Due by September 14, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
MGR  
WALLACE, NATHANIEL  
3685 ROYAL OAK DRIVE  
TITUSVILLE, FL 32780

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
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000000766323  
06/14/07-80003-002 55.00

**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: *Nathaniel Wallace* **NATHANIEL WALLACE**  
MANAGING MEMBER 09 JUNE 07 (321) 264-0713

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

DATE

Debiting Parties