


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000052322 1. Entity Name WATERS WEALTH MANAGEMENT, LLC	
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Principal Place of Business 3711 TAMPA ROAD SUITE 103 TAMPA, FL 34677 US	Mailing Address 3711 TAMPA ROAD SUITE 103 TAMPA, FL 34677 US
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02222007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0469122	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

WATERS, MCCLENDON N 3711 TAMPA ROAD SUITE 103 TAMPA, FL 34677
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**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: *McCleendon N. Waters* DATE: 4/25/07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM WATERS, MCCLENDON N 3711 TAMPA ROAD, SUITE 103 TAMPA, FL 34677
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM WATERS, SHERYL T 3711 TAMPA ROAD TAMPA, FL 34677
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05/16/07-80054-012 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: *McCleendon N. Waters* DATE: 4/25/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #