

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000011572

**FILED**  
**May 27, 2010**  
**Secretary of State**

**Entity Name:** SPIVA'S WATER WORKS L.L.C.

**Current Principal Place of Business:**

25 CARROLL CIRCLE  
BRUCE, FL 32455

**New Principal Place of Business:**

**Current Mailing Address:**

25 CARROLL CIRCLE  
BRUCE, FL 32455

**New Mailing Address:**

**FEI Number:** 26-6155788      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SPIVA, DANIEL  
25 CARROLL CIRCLE  
BRUCE, FL 32455    US

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

SPIVA, DANIEL MGR  
25 CARROLL CIRCLE  
BRUCE, FL 32455    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: MICHEAL SPIVA

05/27/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** SPIVA, MICHAEL  
**Address:** 25 CARROLL CIRCLE  
**City-St-Zip:** BRUCE, FL 32455

**Title:** A  
**Name:** SPIVA, DANIEL  
**Address:** 25 CARROLL CIRCLE  
**City-St-Zip:** BRUCE, FL 32455

I hereby 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: MICHEAL SPIVA

MGR

05/27/2010

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