## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 10, 2006 8:00 am Secretary of State 04-10-2006 90044 017 \*\*\*\*50.00

DOCUMENT # L04000022094  1. Entity Name WATERWAY INVESTMENT PROPERTIES, LLC					04-10-200	06 90044 017 ****.	50.00
Principal Place of Business 1474 JORDAN HILLS CT. CLEARWATER, FL 33756		Mailing Address 1474 JORDAN HILLS CT. CLEARWATER, FL 33756			2002		FSI NI 18F4
2. Principal Place of Business 4250 Central Avenue Suite, Apt. #, etc.		3. Mailing Address 42 So Central Avenue Suite, Apt. #, etc.		ne "	03292006 Chg-LLC CR2E083 (11/05)		
City & State	stersburg FL	City & State St. Petershy Zip	ne FL	4. FEI N 20-	lumber 1059160	No	plied For t Applicable
<u> 33711</u>	USA	33711	WSA	5. Certi	ficate of Status Desired	S5.00 Add Fee Required	
	6. Name and Address of Current R	tegistered Agent	Nama	7. Nam	and Address of New	Registered Agent	
BRUNSON, JOHN MORGAN ESQ 1474 JORDAN HILLS CT. CLEARWATER, FL 33756  Syeet Address (R.O. Box Number is Not Acceptable) 4250 Central Hyerice							
St. Pet				Patersb	ura	FL Zip Code	1/
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, i) the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signafure typed or publied name of registered Agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
Filing Fee is \$50.00 Due by May 1, 2006						ke check payable to la Department of State	•
9.	MANAGING MEMBER	S/MANAGERS	10.		ADDITIONS	CHANGES	
NAME STREET ADDRESS CITY-ST-ZIP	MGR BRUNSON, JOHN MORGAN 1474 JORDAN HILLS CT. CLEARWATER, FL 33756	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	mar Brunson, 4250 Ce	John Morgo ntral Aven	m Schange one SL33711	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FITZGERALD, SARAH E 1474 JORDAN HILLS CT. CLEARWATER, FL 33756	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mgr fitzacra 4250 Ce	d. SarahE	🔀 Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET AODRESS CITY-ST-ZIP	31.10	a sing 1	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Deletæ	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
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.							