


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Apr 28, 2005 8:00 am
Secretary of State

04-07-2005 90089 025 ****50.00

DOCUMENT # L04000057324																											
1. Entity Name WATERWORKS OF TAMPA BAY LLC																											
Principal Place of Business 6320 7TH AVENUE NORTH ST. PETERSBURG, FL 33710		Mailing Address 6320 7TH AVENUE NORTH ST. PETERSBURG, FL 33710																									
2. Principal Place of Business 5045 34TH ST S #236 St. Petersburg FL		3. Mailing Address 380 PINELLAS BOULEVARD J St. Petersburg FL																									
City & State St. Petersburg FL		City & State St. Petersburg FL																									
Zip 33711		Zip 33715																									
Country USA		Country USA																									
4. FEI Number 20-1319245		Applied For Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required																									
6. Name and Address of Current Registered Agent WEBER, CHARLES R 6320 7TH AVENUE NORTH ST. PETERSBURG, FL 33710		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____																											
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State																									
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																									
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: CR Weber CHARLES R. WEBER 4/3/05 222-5040686

SIGNATURE AND TYPED OR PRINTED NAME OF SHARED MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #