2007 LIMITED LIABILITY COMPANY. ANNUAL REPORT

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DOCUMENT # L04000074358

Entity Name

SUPÉRFLUSH SYSTEMS, LLC



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

Principal Place of Business

2347 ST. ANDREWS BLVD PANAMA CITY, FL 32405 Mailing Address

2347 ST. ANDREWS BLVD PANAMA CITY, FL 32405

US



04262007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1908202

Applied For Not Applicable

Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WATTS, THOMAS W 3912 PRINCESS LANE PANAMA CITY, FL 32405

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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 reinstating)

DATE

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

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR BROGDON, DOUGLAS O MGR 3523 37TH PLAZA PANAMA CITY, FL 32404	
TITLE NAME STREET ADDRESS CITY-ST-ZiP	MGR WATTS, THOMAS W MGR 3912 PRINCESS LANE PANAMA CITY, FL 32405	
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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:

JRE:

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

4-26-02

(850)769-3465

Daytime Phone