

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076282

Entity Name: AQUA 804, L.L.C.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

2533 CROOKED CREEK POINT ROAD
MIDDLEBURG, FL 32068

New Principal Place of Business:

2764 SHADE TREE DRIVE
ORANGE PARK, FL 32003

Current Mailing Address:

P.O. BOX 626
MIDDLEBURG, FL 32050

New Mailing Address:

2764 SHADE TREE DRIVE
ORANGE PARK, FL 32003

FEI Number: 20-1776189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCAIFE, WILLIAM O III
2533 CROOKED CREEK POINT ROAD
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

SCAIFE, WILLIAM O III
2764 SHADE TREE DRIVE
ORANGE PARK, FL 32003 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:

04/28/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STA WI VI CONSULTING, , INC.
Address: 2533 CROOKED CREEK POINT ROAD
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STA WI VI CONSULTING, , INC.
Address: 2764 SHADE TREE DRIVE
City-St-Zip: ORANGE PARK, FL 32003

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM O SCAIFE

MBR

04/28/2006

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