

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2006 8:00 am
Secretary of State

02-23-2006 90228 038 ****50.00

DOCUMENT # L05000004792

1. Entity Name
KUSTEN WASSER DEVELOPMENT, LLC



Principal Place of Business
**7 CREEK COURT
DESTIN, FL 32541**

Mailing Address
**P.O. BOX 7098
DESTIN, FL 32541**

20009863



2. Principal Place of Business
10 Commerce Dr
Suite, Apt. #, etc.

3. Mailing Address
PO Box 7098
Suite, Apt. #, etc.

02062006 Chg-LLC CR2E083 (11/05)

City & State
Destin FL
Zip
32541

City & State
Destin FL
Zip
32540

FBI Number
34-2174290

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**WINKLER, JOSEPH A
7 CREEK COURT
DESTIN, FL 32541**

7. Name and Address of New Registered Agent

Name **Salvatori & Wood, P.L.**
Street Address (P.O. Box Number is Not Acceptable)
4001 N Tamiami Trail
Suite 330
City **Naples** FL Zip Code **34103**

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, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **WINKLER, JOSEPH A**
STREET ADDRESS **7 CREEK COURT**
CITY-ST-ZIP **DESTIN, FL 32541**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition
NAME **Joseph A. Winkler**
STREET ADDRESS **10 Commerce Drive**
CITY-ST-ZIP **Destin FL 32541**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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

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

Joseph A Winkler

2-7-06 850-837-5946

Date

Daytime Phone #



ATTACHMENT

Northern Trust Bank Building
4001 Tamiami Trail North, Suite 330
Naples FL 34103-3060
Telephone: (239) 263-1480
Facsimile: (239) 649-0158
www.SalvatoriAndWood.com

James A. Boatman, Jr.
Robert H. Eardley
Leo J. Salvatori
Casey K. Weidenmiller
C. Lane Wood

20009863
L05000004792

February 15, 2006

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Joe A. Winkleler, Inc.
Winkeler Holdings, LLC
Florida Holdings, LLC
Ozean Development, LLC
Ozean, LLC
Kusten Wasser Development, LLC

Dear Sir/Madam:

Enclosed please find the 2006 Annual Report for each of the above-referenced companies, along with a check for \$50 for each filing.

If you should have any questions regarding the enclosed, please do not hesitate to contact me.

Thank you for your assistance.

Respectfully,

SALVATORI & WOOD, P.L.

Leo J. Salvatori

LJS/sn

Enclosures