

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010760

FILED
Jan 11, 2008
Secretary of State

Entity Name: CRYSTAL CLEAR WATER CONDITIONING, LLC

Current Principal Place of Business:

5480 HIGHWAY 70 E
PO BOX 162
OKEECHOBEE, FL 34973

New Principal Place of Business:

5480 HIGHWAY 70 E
OKEECHOBEE, FL 34974

Current Mailing Address:

196 S.W. RIDGECREST DRIVE
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 86-1126118 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HAWKINS, DEBORAH A
196 S.W. RIDGECREST DRIVE
PORT SAINT LUCIE, FL 34953 US

Name and Address of New Registered Agent:

HAWKINS, DEBORAH A RA
196 S.W. RIDGECREST DRIVE
PORT ST LUCIE, FL 34953 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: DEBORAH A HAWKINS

01/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM () Change (X) Addition
Name: HAWKINS, DEBORAH A MM
Address: 196 SW RIDGECREST DRIVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: MM () Change (X) Addition
Name: STANLEY, JOSHUA D MM
Address: 332 SW LAKEHURST DRIVE
City-St-Zip: PORT ST LUCIE, FL 34986 US

I hereby certify that the information supplied with this filing does not qualify 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: DEBORAH A HAWKINS

MM

01/11/2008

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