


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000069379
 1. Entity Name
WET-ROCK INNOVATIONS, LLC



Principal Place of Business Mailing Address
3148 OPORTO ST. **3148 OPORTO ST.**
NORTH PORT, FL 34287 **NORTH PORT, FL 34287**

DO NOT WRITE IN THIS SPACE



03162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5222739	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
HAINSLEY, TERRELL C
3148 OPORTO ST.
NORTH PORT, FL 34287

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000929576
 05/21/08-90075-002 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HAINSLEY, TERRELL C 3148 OPORTO ST. NORTH PORT, FL 34287
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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:  **3/24/08**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #