# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jun 21, 2007**
**Secretary of State**

DOCUMENT# L06000099579

**Entity Name:** TAO WATER LLC

**Current Principal Place of Business:**

1726 MEDICAL BLVD
SUITE 101
NAPLES, FL 34110 US

**New Principal Place of Business:**

**Current Mailing Address:**

1726 MEDICAL BLVD
SUITE 101
NAPLES, FL 34110 US

**New Mailing Address:**

**FEI Number: 26-0395585** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

NICI, JAMES R ESQ.
% COX & NICI
1185 IMMOKALEE ROAD, SUITE 110
NAPLES, FL 34110 US

**Name and Address of New Registered Agent:**

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: ______________________________________________
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete
Name: DENT, MICHAEL T M.D.
Address: 1726 MEDICAL BLVD., SUITE 101
City-St-Zip: NAPLES, FL 34110 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MICHAEL T DENT MGR 06/21/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date