

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113173

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA WATERBLASTING, LLC

**Current Principal Place of Business:**

309 BAYSIDE ROAD  
LAKE WORTH, FL 33461 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 22698  
WEST PALM BEACH, FL 33416 US

**New Mailing Address:**

**FEI Number:** 20-5978438

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLINS, MICHAEL S  
2672 WORCESTER ROAD  
LAKE WORTH, FL 33462 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:** MGRM  
**Name:** DANIELS, FRANCIS G JR  
**Address:** 309 BAYSIDE ROAD  
**City-St-Zip:** LAKE WORTH, FL 33461 US

**Title:** MGRM  
**Name:** COLLINS, MICHAEL S  
**Address:** 2672 WORCESTER ROAD  
**City-St-Zip:** LAKE WORTH, FL 33462 US

I hereby 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 S. COLLINS

MGRM

04/29/2011

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