

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000024421

Entity Name: QUIETWATER, LLC

FILED
Feb 22, 2008
Secretary of State

Current Principal Place of Business:

1101 GULF BREEZE PARKWAY
SUITE 200
GULF BREEZE, FL 32561

Current Mailing Address:

1101 GULF BREEZE PARKWAY
SUITE 200
GULF BREEZE, FL 32561

New Principal Place of Business:

1101 GULF BREEZE PARKWAY
SUITE 109
GULF BREEZE, FL 32561

New Mailing Address:

1101 GULF BREEZE PARKWAY
SUITE 109
GULF BREEZE, FL 32561

FEI Number: 20-8911191

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVAGE, ROBERT D
5625 SANDSTONE DRIVE
PACE, FL 32571 US

Name and Address of New Registered Agent:

SAVAGE, ROBERT D
1411 MALDONADO DR.
PENSACOLA BEACH, FL 32561 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:

02/22/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAVAGE, ROBERT D
Address: 5625 SANDSTONE DRIVE
City-St-Zip: PACE, FL 32571

Title: MGR () Delete
Name: KLING, PETER
Address: 16225 ADAMS LANE
City-St-Zip: SUMMERDALE, AL 36580

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SAVAGE, ROBERT D
Address: P.O. BOX 12504
City-St-Zip: PENSACOLA, FL 325912504

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: ROBERT D. SAVAGE

MGRM

02/22/2008

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