

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102913

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** WATERWAY EQUIPMENT & SERVICES, LLC

**Current Principal Place of Business:**

265 EAST RIVER ROAD  
EAST PALATKA, FL 32131

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 148  
EAST PALATKA, FL 32131

**New Mailing Address:**

**FEI Number:** 26-1214957

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, RICHARD K  
C/O MOSELEY, PRICHARD, ET AL.  
501 WEST BAY STREET  
JACKSONVILLE, FL 32202 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: GSTOHL, KENNETH E  
Address: 265 E RIVER RD  
City-St-Zip: EAST PALATKA, FL 32131

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GSTOHL, KENNETH E  
Address: 265 E RIVER RD  
City-St-Zip: EAST PALATKA, FL 32131

Title: MGR ( ) Change (X) Addition  
Name: POWELL FAMILY ENTERP, RISES  
Address: 15 PIEDMONT CENTER, STE 1500  
City-St-Zip: ATLANTA, GA 30305

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:** KENNETH E. GSTOHL

MGRM

01/06/2009

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