

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000117762

FILED  
Mar 27, 2012  
Secretary of State

**Entity Name:** CHAD'S WATER WORKS PLUMBING, LLC

**Current Principal Place of Business:**

4606 NE JACKSONVILLE RD.  
OCALA, FL 34479

**New Principal Place of Business:**

4606 NE JACKSONVILLE RD.  
OCALA, FL 34479 US

**Current Mailing Address:**

4606 NE JACKSONVILLE RD.  
OCALA, FL 34479

**New Mailing Address:**

4606 NE JACKSONVILLE RD.  
OCALA, FL 34479 US

FEI Number: 26-1489784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OPALESKI, CHAD J  
4606 NE JACKSONVILLE RD  
OCALA, FL 34479 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: OPALESKI, CHAD J  
Address: 4606 NE JACKSONVILLE RD.  
City-St-Zip: Ocala, FL 34479 US

Title: MGRM  
Name: OPALESKI, CAROL A  
Address: 11691 N KENLAKE CIRCLE  
City-St-Zip: DUNNELLON, FL 34434 US

Title: MGRM  
Name: OPALESKI, ANDREW J  
Address: 11691 N KENLAKE CIRCLE  
City-St-Zip: DUNNELLON, FL 34434 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: CAROL A. OPALESKI

MGRM

03/27/2012

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