

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000094524

FILED
Jul 15, 2009
Secretary of State

Entity Name: SOLUTIONS WITH WATER, LLC

Current Principal Place of Business:

451 CENTRAL PARK DRIVE
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

451 CENTRAL PARK DRIVE
LARGO, FL 33771 US

New Mailing Address:

FEI Number: 26-3492466 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:

Name and Address of New Registered Agent:

DAVENPORT, DOUGLAS
451 CENTRAL PARK DRIVE
LARGO, FL 33771 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DAVENPORT, DOUGLAS
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771 US

Title: MGR () Delete
Name: CALLAHAN, MICHAEL
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771 US

Title: MGR () Delete
Name: HEATH, KEVIN
Address: 451 CENTRAL PARK DRIVE
City-St-Zip: LARGO, FL 33771 US

ADDITIONS/CHANGES:

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

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

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: DOUGLAS DAVENPORT

MGR

07/15/2009

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