

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003232

**FILED**  
**Jan 17, 2011**  
**Secretary of State**

**Entity Name:** CRYSTAL CLEAR FOUNTAINS, LLC

**Current Principal Place of Business:**

1523 A ROAD  
LABELLE, FL 33935 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1784  
LABELLE, FL 33975 US

**New Mailing Address:**

**FEI Number:** 26-4156450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VASQUEZ, KATHY  
1445 A ROAD  
LABELLE, FL 33935 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:** VASQUEZ, KATHY  
**Address:** 1445 A ROAD  
**City-St-Zip:** LABELLE, FL 33935 US

**Title:** MGRM  
**Name:** KIRTLEY, CRYSTAL  
**Address:** 1523 A ROAD  
**City-St-Zip:** LABELLE, FL 33935 US

**Title:** MGRM  
**Name:** VASQUEZ, PETER  
**Address:** 1445 A ROAD  
**City-St-Zip:** LABELLE, FL 33935 US

**Title:** MGRM  
**Name:** KIRTLEY, KENNETH  
**Address:** 1523 A ROAD  
**City-St-Zip:** LABELLE, FL 33935 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:** KATHY VASQUEZ

MGRM

01/17/2011

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