

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025155

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** HWY 19-S WATER SYSTEMS LLC

**Current Principal Place of Business:**

904-A HIGHWAY 19 SOUTH  
PALATKA, FL 32177 US

**New Principal Place of Business:**

904 HIGHWAY 19 SOUTH  
PALATKA, FL 32177 US

**Current Mailing Address:**

PO BOX 821  
PALATKA, FL 32178 US

**New Mailing Address:**

**FEI Number:** 27-1856853

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPILLERS, JOHN E III  
930 HWY 19 SOUTH  
PALATKA, FL 32177 US

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

SPILLERS, JOHN E III  
930 HWY 19 SOUTH  
SUITE 4  
PALATKA, FL 32177 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:

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SPILLERS, JOHN E III  
Address: PO BOX 821  
City-St-Zip: PALATKA, FL 32178

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: JOHN E. SPILLERS, III

MGRM

01/04/2012

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