

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001630

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: WATERLINE PROPERTIES, L.L.C.

**Current Principal Place of Business:**

1295 ROCKLEDGE DRIVE  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 561076  
ROCKLEDGE, FL 329561076

**New Mailing Address:**

FEI Number: 59-3561531      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:**

PAYNE, LEE M  
1295 ROCKLEDGE DRIVE  
ROCKLEDGE, FL 32955      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: MGRM ( ) Delete  
Name: PAYNE, LEE M  
Address: 1295 ROCKLEDGE DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM ( ) Delete  
Name: WALKER, IVAN B  
Address: 1881 ROCKLEDGE DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGRM ( ) Delete  
Name: WALKER, BENNY  
Address: 908 MT. SOMA COURT  
City-St-Zip: FALSTON, MD 21047

**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 for the exemption stated in Section 119.07(3)(i), 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: LEE M. PAYNE

MGRM

06/30/2005

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