## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # M05000004900**

1. Entity Name

WATERVIEW MANAGEMENT LLC



Principal Place of Business

Mailing Address

38 SOUTH STREET MILFORD, CT 06480

38 SOUTH STREET MILFORD, CT 06480

## FILED Apr 28, 2008 08:00 AM Secretary of State



04242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required Fee Required

(NOTE: Registered Agent signature required when reinstating)

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and tale if applicable

MANAGING MEMBERS/MANAGERS

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST.

TALLAHASSEE, FL 32301-1283

DO NOT WRITE IN THIS SPACE

8. 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.	I am familiar with, and accept
the obligations of registered agent.	
SIGNATURE	

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

TITLE NAME	MGRM PORTOFF, DAWNMARIE	
STREET ADDRESS	38 SOUTH STREET	
CITY-ST-ZIP	MILFORD, CT 06480	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	;	
NAME STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exe		

U00000925861 05/20/08-80044-004 138.7

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Davidina Phone