

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000066108

**Entity Name:** WTR, LLC

**Current Principal Place of Business:**

205 NORTH ELM AVENUE  
SANFORD, FL 32771

**Current Mailing Address:**

205 NORTH ELM AVENUE  
SANFORD, FL 32771

**FEI Number:** 83-0676132

**Certificate of Status Desired:** No

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

KIMELMAN, ROBERT  
205 NORTH ELM AVENUE  
SANFORD, FL 32771 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

**Authorized Person(s) Detail :**

Title MBR  
Name ROYSTER, WILLIAM T TRUSTEE  
Address 205 NORTH ELM AVENUE  
City-State-Zip: SANFORD FL 32771

Title MBR  
Name FRANK, THOMAS TRUSTEE  
Address 205 NORTH ELM AVENUE  
City-State-Zip: SANFORD FL 32771

Title MBR  
Name ROBERT & JENNIFER KIMELMAN TRUSTEES  
Address 205 NORTH ELM AVENUE  
City-State-Zip: SANFORD FL 32771

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** THOMAS FRANK

MBR

02/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date