## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Feb 09, 2006 08:00 AM Secretary of State

	DOC	JMENT:	‡ L03	000	007	188
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1. Entity Name
GALLEON MARINA RENTAL AND MANAGEMENT, LLC



Principal Place of Business

MAME STREET ADDRESS CITY-ST-ZIP

Mailing Address

1510 SOUTH TUTTLE AVENUE SARASOTA, FL 34239 1510 SOUTH TUTTLE AVENUE SARASOTA, FL 34239

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nansanns Na Cha-LLC	CR2F083 (11/05)

4. FEI Number | Applied For | 56-2352770 | Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MAGLICH, DAVID'S ESQ. 1515 RINGLING BLVD., SUITE 1000 SARASOTA, FL 34236

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char tions of registered agent.	nging its registere	ed office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept			
SIGNATURE_	Signature, typed or puriled name of registered agent and title if applicable	(NOTE: Registered	Agent signature required when reinstating)	DATE			
FI	iling Fee is \$50.00 ue by May 1, 2006		······································				
9.	MANAGING MEMBERS/MANAGERS	}	l				
HILE YAME STREET ADDRESS CITY-ST-ZIP	MGRM LETSCHERT, TURDO 1510 SOUTH TUTTLE AVENUE SARASOTA, FL 34239						
ntle Name Street Address City-St-Zip	MGRM SMITH, ROY 1510 SOUTH TUTTLE AVENUE SARASOTA, FL 34239			000000428205 02/21/06-80038-014 50.00			
ntle Hams Street Address Caty-St-Zip	;		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CHTY-ST-ZIP			IN	IN THIS SPACE			
DITLE NAME STREET ADDRESS CITY-ST-ZIP							
INTE	1	}	7				

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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE: SIGNATURE AND TITLED UN PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone 6