

**2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 11, 2011  
Secretary of State**

**DOCUMENT#** L10000046017

**Entity Name:** EXTRAVAGANZA CHARTERS LLC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

251 CREEKSIDE DRIVE  
AMELIA ISLAND, FL 32034 US

**Current Mailing Address:**

**New Mailing Address:**

142 WASHINGTON STREET  
ST. AUGUSTINE, FL 32084 US

**FEI Number:**  **FEI Number Applied For ( )**  **FEI Number Not Applicable (X)**  **Certificate of Status Desired ( )**

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

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

RETZLAFF, ROBIN M  
142 WASHINGTON ST.  
ST. AUGUSTINE, FL 32084 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  
**Name:** RETZLAFF, ROBIN M  
**Address:** 142 WASHINGTON STREET  
**City-St-Zip:** ST. AUGUSTINE, FL 32084 US

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: ROBIN M. RETZLAFF MGRM 01/11/2011

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