

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000057

FILED
Jan 05, 2005
Secretary of State

Entity Name: DAY IN PARADISE CHARTERS, LLC

Current Principal Place of Business:

319 YORKSHIRE STREET
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

319 YORKSHIRE STREET
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 36-4337163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLCOMB, KATHLEEN L
319 YORKSHIRE STREET
PORT CHARLOTTE, FL 33954 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR () Delete
Name: HOLCOMB, JR., BOBBY G
Address: 319 YORKSHIRE ST
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES:

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: BOBBY G HOLCOMB JR

MGR

01/05/2005

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