

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000003323**

1. Entity Name  
**FISHBOWL, L.L.C.**



Principal Place of Business  
**83230 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036**

Mailing Address  
**P.O. BOX 965  
ISLAMORADA, FL 33036**

**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-LLC

CRZE083 (11/05)

4. FEI Number  
**65-1001885**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2008**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
JONES, PAUL TUDOR II  
92 HARBOR DRIVE  
GREENWICH, CT 06830**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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02/17/06 80040-021 55.00

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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: PAUL T. JONES II**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**1/23/06**  
Date

**(903) 863-6767**  
Daytime Phone