

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006150

FILED  
Mar 20, 2007  
Secretary of State

**Entity Name:** AMELIA RIVER CRUISES AND CHARTERS, L.L.C.

**Current Principal Place of Business:**

4883 OTIS TRAIL  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

2206 FLORIDA AVE  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

**FEI Number:** 59-3554056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCARTHY, KEVIN P  
2206 FLORIDA AVENUE  
FERNANDINA BEACH, FL 32034 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MCCARTHY, BRIAN  
Address: 2112 N 14TH ST.  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM ( ) Delete  
Name: MCCARTHY, GLENN  
Address: 1816 S WICKE DR  
City-St-Zip: FLOWER MOUND, TX 75028

Title: MGRM ( ) Delete  
Name: MCCARTHY, SEAN  
Address: SCOTT RD  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM ( ) Delete  
Name: BROUD, KERRI  
Address: 3715 DRIFTWOOD DR  
City-St-Zip: MELBOURNE, FL 32935

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 Chapter 119, 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: KEVIN MCCARTHY

OWNE

03/20/2007

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