

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013273

FILED  
Jul 07, 2005  
Secretary of State

Entity Name: SAFE HARBOUR MARINA LLC

**Current Principal Place of Business:**

6810 FRONT STREET  
STOCK ISLAND, FL 33042

**New Principal Place of Business:**

**Current Mailing Address:**

6810 FRONT STREET  
STOCK ISLAND, FL 33042

**New Mailing Address:**

FEI Number: 59-3679583      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

LEWIS & WHITE LC  
222 WEST GEORGIA STREET  
TALLAHASSEE, FL 32301      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: MGR      ( ) Delete  
Name: CRUMBLEY, WALTER S JR  
Address: 6810 FRONT ST  
City-St-Zip: KEY WEST, FL 33040

Title: MGR      ( ) Delete  
Name: O'CONNELL, JOSEPH J JR  
Address: 6810 FRONT ST  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

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 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: WALTER S CRUMBLEY JR

MGR

07/07/2005

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