## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L00000013356

PORT ST. JOE BOATWORKS & DRY STORAGE, LLC



**FILED** Apr 19, 2004 08:00 AM Secretary of State

Principal Place of Business 520 SE 32ND STREET

FORT LAUDERDALE, FL 33316

Mailing Address

520 SE 32ND STREET FORT LAUDERDALE, FL 33316



04142004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1059003

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DIXON, JOHN 520 SE 32ND STREET FORT LAUDERDALE, FL 33316			DO NOT WRITE IN THIS SPACE	
	named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accep	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 ue by May 1, 2004		•	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGR DIXON, JOHN 520 SE 32ND ST. FORT LAUDERDALE, FL 33316		UMNNOQ117044 94/19/04-80004-003, 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			**************************************	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			•	
TITLE			<del>.</del>	

11. I hereby certify that the Information supplied with this filing does not qualify 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 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.

NAME STREET ADDRESS CITY-ST-ZIP

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