


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90043 015 ****50.00

DOCUMENT # L01000001595		
1. Entity Name RIVERWATCH MARINE, LLC		

Principal Place of Business 3210 ST. CHARLES PLACE BOCA RATON, FL 33434	Mailing Address 3210 ST. CHARLES PLACE BOCA RATON, FL 33434
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2. Principal Place of Business 801 SW SAN ANTONIO DRIVE Suite, Apt. #, etc.	3. Mailing Address 801 SW SAN ANTONIO DRIVE Suite, Apt. #, etc.
City & State Palm City, Florida	City & State Palm City, Florida
Zip 34990	Country Martin



07072005 Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1127288	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BIGGS, ARTHUR E 3210 ST. CHARLES PLACE BOCA RATON, FL 33434	7. Name and Address of New Registered Agent Name: Biggs, Arthur E Street Address (P.O. Box Number is Not Acceptable): 801 S.W. SAN ANTONIO DRIVE City: Palm City, FL 34990
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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: Arthur E Biggs (NOTE: Registered Agent signature required when reinstating) DATE: 7/7/05

Filing Fee is \$50.00 Due by September 7, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENWICH CAPITAL CORPORATION 3210 ST. CHARLES PLACE BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Greenwich Capital Corp 801 SW SAN ANTONIO DRIVE Palm City, Florida 34990 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIGGS, ARTHUR E 3210 ST CHARLES PL BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Biggs, Arthur E 801 SW San Antonio Drive Palm City, Florida 34990 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIGGS, WILLIAM E 3210 ST CHARLES PL BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR William E. Biggs 4456 SW Bimini Circle S Palm City, Florida 34990 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BIGGS, CHARLOTTE E 3210 ST. CHARLES PLACE BOCA RATON, FL 33434 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Biggs, Charlotte E 801 SW San Antonio Drive Palm City, Florida 34990 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Biggs, Arthur E III 4401 SW Bimini Circle N Palm City, Florida 34990 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Arthur E Biggs DATE: 7/7/05 DAYTIME PHONE #: 772-597-5862

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