2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

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Entity Name: EVERGLADES ISLAND BOAT TOURS, LLC.

Current Principal Place of Business:

929 DUPONT STREET
EVERGLADES CITY, FL 34139

New Principal Place of Business:

Current Mailing Address:

PO BOX 540
EVERGLADES CITY, FL 34139

New Mailing Address:

FEI Number: 59-3697612 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REWIS, EDDIE R SR
1133 REWIS DRIVE
CHOKOLOSKEE, FL 34138 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
Name: DANIELS, CRAIG M SR
Address: 1130 REWIS DRIVE
City-St-Zip: CHOKOLOSKEE, FL 34138

Title: MGRM
Name: REWIS, EDDIE R JR
Address: 1195 CHOKOLOSKEE DR
City-St-Zip: CHOKOLOSKEE, FL 34138

Title: MGRM
Name: REWIS, LORNA
Address: 1130 REWIS DRIVE
City-St-Zip: CHOKOLOSKEE, FL 34138

Title: MGRM
Name: DANIELS, MARTHA A
Address: 1130 REWIS DRIVE
City-St-Zip: CHOKOLOSKEE, FL 34138

I hereby 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 Statues.

SIGNATURE: MARTHA DANIELS MGRM 04/29/2011

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