

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 16, 2004 08:00 AM
Secretary of State**

DOCUMENT # L01000005969

1. Entity Name
STUART CAY YACHT SALES, LLC



Principal Place of Business
**290 NORTH DIXIE HIGHWAY
STUART, FL 34994**

Mailing Address
**290 NORTH DIXIE HIGHWAY
STUART, FL 34994**



01202004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1092876

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAFT, STUART J ESQ.
321 ROYAL POINCIANA PLAZA
PALM BEACH, FL 33480**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

**U000000116687
04/16/04-80074-018 50.00**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	STRAUS, JUDD B
STREET ADDRESS	885 NE STOKES TERRACE
CITY-ST-ZIP	JENSEN BEACH, FL 34957
TITLE	MGRM
NAME	KROGEN, KURT M
STREET ADDRESS	290 NORTH DIXIE HIGHWAY
CITY-ST-ZIP	STUART, FL 34994
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: _____

Kurt M. Krogen

4/13/04 (772) 286-0171

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

Date

Daytime Phone #