## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000012238

Entity Name: SAROCA BOATS OF FLORIDA, L.L.C.

FILED Jun 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

112 N. FLORIDA AVE DELAND, FL 32720

**Current Mailing Address: New Mailing Address:** 

PO BOX 677

DELAND, FL 327210677

FEI Number: 59-3737211 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:

WILLIAMS, LESLIE H 435 N. MARYDELL AVE. DELAND, FL 32720

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM Title: () Delete (X) Change ( ) Addition

WATTS, MARK A Name: Name: WATTS, MARK Address: 200 W. WASHINGTON AVE. Address: 435 N. MARYDELL AVE City-St-Zip: DELAND, FL 32720 City-St-Zip: DELAND, FL 32720

Title: MGR () Delete Title: MMGR (X) Change ( ) Addition Name: WILLIAMS, LESILE H Name: WILLIAMS, LESILE H

Address: 435 N. MARYDELL AVE Address: 435 N. MARYDELL AVE City-St-Zip: DELAND, FL 32720 City-St-Zip: DELAND, FL 32720

Title: MGR () Delete Title: MMGR (X) Change ( ) Addition

TAYLOR, SIDNEY Name: TAYLOR, SIDNEY Name: 435 N. MARYDELL AVE Address: Address: 435 N. MARYDELL AVE City-St-Zip: DELAND, FL 32724 City-St-Zip: DELAND, FL 32720

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LESLIE H WILLIAMS **MMGR** 06/13/2006