

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012238

FILED
Apr 19, 2007
Secretary of State

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

Current Principal Place of Business:

112 N. FLORIDA AVE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

PO BOX 677
DELAND, FL 327210677

New Mailing Address:

FEI Number: 59-3737211

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, LESLIE H
435 N. MARYDELL AVE.
DELAND, FL 32720 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: MMGR () Delete
Name: WATTS, MARK
Address: 435 N. MARYDELL AVE
City-St-Zip: DELAND, FL 32720

Title: MMGR () Delete
Name: WILLIAMS, LESILE H
Address: 435 N. MARYDELL AVE
City-St-Zip: DELAND, FL 32720

Title: MMGR () Delete
Name: TAYLOR, SIDNEY
Address: 435 N. MARYDELL AVE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

04/19/2007

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