2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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FILED
Apr 28, 2003 8:00 am
Secretary of State
03-18-2003 90148 038 ****50.00

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DOCUMENT # L02000021985

1. Entity Name
QUEEN'S HARBOUR MARINA, LLC

Principal Place of Business	Mailing Address
2325 ULMERTON ROAD, SUITE 20 CLEARWATER FL 33762	2325 ULMERTON ROAD, SUITE 20 CLEARWATER FL 33762

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 02-0651803 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~CEHA, LLC~~ ~~ONE HARBOUR PLACE, 5TH FLOOR~~ ~~777 S. HARBOUR ISLAND BOULEVARD~~ ~~TAMPA FL 33602-5730~~	Name GREGORY D. MORRIS Street Address (P.O. Box Number is Not Acceptable) 2325 ULMERTON RD STE 20 SUITE 20 City CLEARWATER FL Zip Code 33762

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] 3/27/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~[illegible]~~ MANAGER ~~2325 ULMERTON RD STE 20 CLEARWATER, FL 33762~~	☐ Change ~~☐ Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	GREGORY D. MORRIS MANAGER 2325 ULMERTON RD STE 20 CLEARWATER, FL 33762	☐ Change ☒ Addition
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CR2E083 (10/02)

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: [signature] GREGORY D. MORRIS 2/25/03 727-526-6424
SIGNATURE AND TYPED OR PRINTED NAME OF MGRMG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #