

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000023401

**FILED**  
**Dec 02, 2007**  
**Secretary of State****Entity Name:** PERFORMANCE FISHING TECHNOLOGIES, L.L.C.**Current Principal Place of Business:**1455 CURLEW AVE  
1  
NAPLES, FL 34102 US**New Principal Place of Business:****Current Mailing Address:**PO BOX 8323  
NAPLES, FL 34101 US**New Mailing Address:**1455 CURLEW AVE  
SUITE # 1  
NAPLES, FL 34102 US**FEI Number:** 30-0110943**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**MINARCIN, BERNARD J  
1455 CURLEW AVE  
1  
NAPLES, FL 34102 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:** P ( ) Delete  
**Name:** MINARCIN, BERNARD J  
**Address:** 1455 CURLEW AVE  
**City-St-Zip:** NAPLES, FL 34102**Title:** V ( ) Delete  
**Name:** KOSTICK, SANDRA S  
**Address:** 9239 KINCAID COURT  
**City-St-Zip:** SANIBEL ISLAND, FL 33957**ADDITIONS/CHANGES:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** V (X) Change ( ) Addition  
**Name:** CRANS, ROBERT R  
**Address:** 3260 60TH STREET SW  
**City-St-Zip:** NAPLES, FL 34116

I hereby certify that the information supplied with this filing does not qualify 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: BERNARD J MINARCIN

P

12/02/2007

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