

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 18, 2004 8:00 am**  
**Secretary of State**

03-18-2004 90184 020 \*\*\*\*50.00

**DOCUMENT # L02000026262**

1. Entity Name

MARINA MOTEL AND MARINA, L.L.C.



Principal Place of Business

1345 U.S. HIGHWAY 98E  
FORT WALTON BEACH FL 32548

Mailing Address

1345 U.S. HIGHWAY 98E  
FORT WALTON BEACH FL 32548

24024681

2. Principal Place of Business

1345 US HWY 98 SE

3. Mailing Address

SAME



MOORE

CR2E083 (11/03)

City & State

FT. WALTON BCH. FL. 32548

City & State

SAME

4. FEI Number

55-0799618

Applied For

Not Applicable

Zip

32548

Country

OKALOOSA

Zip

SAME

Country

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

ENGEL, NORBERT W  
1345 U.S. HIGHWAY 98E  
FORT WALTON BEACH FL 32548

Name N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 of Norbert W. Engel* NORBERT W. ENGEL

3-11-2004

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, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME ENGEL, NORBERT W  
STREET ADDRESS 1301 WALKER DRIVE  
CITY-ST-ZIP BAKER FL 32531

TITLE MGRM ☐ Delete  
NAME ENGEL, JANETTE F  
STREET ADDRESS 1301 WALKER DRIVE  
CITY-ST-ZIP BAKER FL 32531

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGRM/P ☒ Change ☐ Addition  
NAME ENGEL, NORBERT W.  
STREET ADDRESS 1301 WALKER DRIVE  
CITY-ST-ZIP BAKER, FL 32531

TITLE MGRM/S/T ☒ Change ☐ Addition  
NAME ENGEL, JANETTE F.  
STREET ADDRESS 1301 WALKER DRIVE  
CITY-ST-ZIP BAKER, FL 32531

TITLE M/VP ☐ Change ☒ Addition  
NAME ENGEL, CHRISTOPHER-N.  
STREET ADDRESS 2648 W. CRYSTAL AVE., APT.3  
CITY-ST-ZIP CHICAGO, IL 60622

TITLE M/Asst.S ☐ Change ☒ Addition  
NAME ENGEL, SEBASTIAN E.  
STREET ADDRESS 334 LAKE DRIVE  
CITY-ST-ZIP FT. WALTON BEACH, FL 32548

TITLE M/GM ☐ Change ☒ Addition  
NAME ENGEL, JEREMY D.  
STREET ADDRESS 2648 W. CRYSTAL AVE., APT.#  
CITY-ST-ZIP CHICAGO, IL. 60622

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 609, Florida Statutes.

SIGNATURE

*Signature of Norbert W. Engel* NORBERT W. ENGEL  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date 3-11-2004 Daytime Phone #

*Signature of Janette F. Engel* JANETTE F. ENGEL (850) 537 8509