

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000034814

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** OFFSHORE MARINE CENTER, LLC

**Current Principal Place of Business:**

1357 SHEFFIELD WAY  
1357  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1357 SHEFFIELD WAY  
1357  
FORT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 42-1568272      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARTER, DONALD D III  
1357 SHEFFIELD WAY  
FORT MYERS, FL 33919      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:** MGRM  
**Name:** CARTER, DONALD D III  
**Address:** 1357 SHEFFIELD WAY  
**City-St-Zip:** FORT MYERS, FL 33919

**Title:** MGRM  
**Name:** CARTER, DONALD D  
**Address:** 9820 CYPRESS LAKE DR  
**City-St-Zip:** FORT MYERS, FL 33919

I hereby 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: DONALD D CARTER III      MGRM      04/22/2011

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