
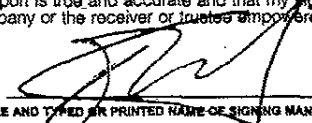


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 12, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000034951		
1. Entity Name TAVERNIER CREEK BONEFISH COMPANY LLC		
Principal Place of Business 139 SEASIDE AVENUE SLIP #5, KEY LARGO, FL 33037		Mailing Address 200 WRENN ST #301 TAVERNIER, FL 33070
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WALCH, TIMOTHY A CAPT. 200 WRENN ST. SUITE #301 TAVERNIER, FL 33037		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WALCH, TIMOTHY A CAPT. 200 WRENN ST. SUITE #301 TAVERNIER, FL 33037	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		1/9/07 (305) 393-3440
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>



01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 04-3730362	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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01/12/07-80030-016 50.00