2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Feb 08, 2008 08:00 AN DOCUMENT # L03000013936 **Secretary of State** 1. Entity Name THE MOTHER SHIP, LLC Principal Place of Business Mailing Address 1006 BAY AVE. 1006 BAY AVE. CLEARWATER, FL 33756 CLEARWATER, FL 33756 02032008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **GUTHRIE, SARAH W** DO NOT WRITE 1006 BAY AVE. CLEARWATER, FL 33756 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorature required when reinstating) FILE NOWI! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGRM TITLE NAME **GUTHRIE, SARAH W MGRM** STREET ADDRESS 1006 BAY AVENUE CITY-ST-7IP CLEARWATER, FL 33756 U00000820654 02/18/08-80037-019 138.75 TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS

Jarah It Duthrie

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

Sarah W Guthrie Februsia 2, 2008

FILED

^{11.} I hereby certify that the information supplied with this filing does not quality 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 608, Florida Statutes.