## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000022343

Entity Name: MILSHER BOAT, LLC

Name:

Address:

City-St-Zip:

SHER, MANDEL

8651 MAIDSTONE COURT

LARGO, FL 33777 US

FILED Jul 16, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 111 ESTADO WAY NE ST. PETERSBURG, FL 33704 US **Current Mailing Address: New Mailing Address:** 111 ESTADO WAY NE ST. PETERSBURG, FL 33704 US FEI Number: 65-1193522 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLER, HOWARD S 111 ESTADO WAY NE ST. PETERSBURG, FL 33704 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MILLER, HOWARD S Name: Name: 111 ESTADO WAY NE Address: Address: City-St-Zip: ST. PETERSBURG, FL 33704 US City-St-Zip: Title: MGRM Title: ( ) Delete () Change () Addition Name: MILLER, JAY Name: Address: 723 17TH AVENUE NE Address: City-St-Zip: ST. PETERSBURG, FL 33704 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition SHER, CRAIG Name: Name: 9055 BAYWOOD PARK DRIVE Address: Address: City-St-Zip: SEMINOLE, FL 33777 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HOWARD MILLER MGRM 07/16/2008