2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # L03000032467 Secretary of State 1. Entity Name BANYAN BOATWORKS, L.L.C. Mailing Address Principal Place of Business PO BOX 15163 GAINESVILLE FL 32604 207 SE 10TH PL GAINESVILLE FL 32601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. II, etc. 1st MOORE CR2E083 (10/05) Applied For City & State City & State 4. FEI Number 56-2391486 Not Applicat Country Zip Country Ζip \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GROENE, RICHARD Street Address (P.O. Box Number is Not Acceptable) 909 N.W. 6TH STREET GAINESVILLE FL 32601 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 access the obligations of registered agent. (NOTE Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and utte if applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. ☐ Change ☐ Additt RITLE MGR Delete TITLE NAME NAME GROENE, RICHARD U00000423192 02/17/06-80047-005 50.00 STREET ADDRESS STREET ADDRESS 909 N.W. 6TH STREET CITY-ST-ZIP GAINESVILLE FL 32601 CITY-ST-ZIP ☐ Change ☐ At fin IITLE Delete THE NAME MARKE STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete παE Change □ ... NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change Ad-NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-70 CITY-ST-21P ☐ Change สภาภ ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TRILE ☐ Delete TITLE _ □ Aê STREET ADDRESS STREET ADDRESS City-St-ZiP CITY-ST-7IP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the informatic 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 it limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Richard S. Groene 1.26.06

FILED Feb 06, 2006 08:00 AM