


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 22, 2004 8:00 am**  
**Secretary of State**

07-22-2004 90097 026 \*\*\*\*55.00

|   |  |                     |   |   |  |
|---|--|---------------------|---|---|--|
| <b>DOCUMENT # L03000037189</b><br>1. Entity Name<br>ISLAND GIRL YACHTS LLC  |  |                     |   |                                    |  |
| Principal Place of Business<br>104220 OVERSEAS HIGHWAY<br>KEY LARGO, FL 33037   |  |                     | Mailing Address<br>104220 OVERSEAS HIGHWAY<br>KEY LARGO, FL 33037   |   |  |
| 2. Principal Place of Business  |  | 3. Mailing Address  |   |   |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc. |   |   |  |
| City & State  |  | City & State        |   |   |  |
| Zip   | Country  | Zip                 | Country   | 4. FEI Number <span style="float: right;">Applied For<br/><input checked="" type="checkbox"/> Not Applicable</span> |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required   |  |                     |   | 07172004 Chg-LLC CR2E083 (10/03)  |  |
| 6. Name and Address of Current Registered Agent   |  |                     | 7. Name and Address of New Registered Agent   |   |  |
| THALER, SHIRLEE<br>104220 OVERSEAS HIGHWAY<br>KEY LARGO, FL 33037   |  |                     | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;">FL</span> 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 accept the obligations of registered agent.   |  |                     |   |   |  |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____   |  |                     |   |   |  |
| <b>Filing Fee is \$50.00<br/>Due by September 8, 2004</b>   |  |                     |   | <b>Make check payable to<br/>Florida Department of State</b>  |  |
| 9. MANAGING MEMBERS/MANAGERS  |  |                     | 10. ADDITIONS/CHANGES   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | MGR<br>THALER, SHIRLEE<br>104220 OVERSEAS HIGHWAY<br>KEY LARGO, FL 33037 |                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Delete  |                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |  |
| 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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. |  |                     |   |   |  |
| <b>SIGNATURE:</b> <i>Shirlee Thaler</i> <span style="float: right;">07/15/04 305-451-1169</span>  |  |                     |   |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE <span style="float: right;">Date Daytime Phone #</span>   |  |                     |   |   |  |