

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 09, 2004
Secretary of State

Entity Name: EXPERIENCE WILD DOLPHINS, LLC

Current Principal Place of Business:

C/O JAMES R. MEROLA, ESQ.
11380 PROSPERITY FARMS ROAD, SUITE #204
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

C/O JAMES R. MEROLA, ESQ.
11380 PROSPERITY FARMS ROAD, SUITE #204
PALM BEACH GARDENS, FL 33410

FEI Number: 20-0633886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEROLA, JAMES R
11380 PROSPERITY FARMS ROAD
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

C/O JAMES R. MEROLA, ESQ.
11380 PROSPERITY FARMS ROAD, SUITE #204
PALM BEACH GARDENS, FL 334103477

New Mailing Address:

EXPERIANCE WILD DOLPHIN LLC
PO BOX 242
PALM BEACH, FL 33480

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGRM () Delete
Name: CORIS, ELLEN
Address: 11380 PROSPERITY FARMS ROAD, SUITE #204
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CORIS, ELLEN
Address: PO BOX 242
City-St-Zip: PALM BEACH, FL 33480

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: ELLEN CORIS

MGRM

03/09/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date