

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000005940

Entity Name: EXOTIC AQUATICS, LLC

**FILED**  
**Apr 23, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

6014 SHIRLEY STREET  
SUITE B  
NAPLES, FL 34109

**New Principal Place of Business:**

1021 HOLLY GATE LANE  
NAPLES, FL 34103

**Current Mailing Address:**

6014 SHIRLEY STREET  
SUITE B  
NAPLES, FL 34109

**New Mailing Address:**

PO BOX 413005 PMB 143  
NAPLES, FL 34101

FEI Number: 20-0647437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PERKINS, JOHN D  
6014 SHIRLEY STREET  
SUITE B  
NAPLES, FL 34109 US

**Name and Address of New Registered Agent:**

PERKINS, JOHN D  
1021 HOLLY GATE LANE  
NAPLES, FL 34103 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:

04/23/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PERKINS, JOHN D  
Address: 6014 SHIRLEY STREET  
City-St-Zip: NAPLES, FL 34109

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PERKINS, JOHN D  
Address: 1021 HOLLY GATE LANE  
City-St-Zip: NAPLES, FL 34103

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

SIGNATURE: J D PERKINS

MRGM

04/23/2006

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