

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005940

Entity Name: EXOTIC AQUATICS, LLC

FILED
Apr 28, 2011
Secretary of State

Current Principal Place of Business:

1021 HOLLY GATE LANE
NAPLES, FL 34103

New Principal Place of Business:

1021 HOLLY GATE LANE
NAPLES, FL 34103 UN

Current Mailing Address:

PO BOX 413005 PMB 143
NAPLES, FL 34101

New Mailing Address:

PO BOX 413005 PMB 143
NAPLES, FL 34101 UN

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
1021 HOLLY GATE LANE
NAPLES, FL 34103 US

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/MANAGERS:

Title: MGRM
Name: PERKINS, JOHN D
Address: 1021 HOLLY GATE LANE
City-St-Zip: NAPLES, FL 34103 UN

Title: MGRM
Name: PERKINS, JON D
Address: PO 413005 PMB 143
City-St-Zip: NAPLES, FL 34101 UN

Title: MGRM
Name: PERKINS, JON D
Address: PO 413005 PMB 143
City-St-Zip: NAPLES, FL 34101 UN

Title: MGRM
Name: PERKINS, JON D
Address: PO 413005 PMB 143
City-St-Zip: NAPLES, FL 34101 UN

Title: MGRM
Name: PERKINS, JON D
Address: PO 413005 PMB 143
City-St-Zip: NAPLES, FL 34101 UN

Title: MGRM
Name: PERKINS, JON D
Address: PO 413005 PMB 143
City-St-Zip: NAPLES, FL 34101

I hereby 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: JON D PERKINS

MGRM

04/28/2011

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