


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000022144 1. Entity Name EAU GALLIE MARINE, LLC	
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Principal Place of Business 1717 AURORA ROAD MELBOURNE, FL 32935 US	Mailing Address 1717 AURORA ROAD MELBOURNE, FL 32935 US
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DO NOT WRITE IN THIS SPACE



02072008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-0898545	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KRASNY, SCOTT
304 S. HARBOR CITY BLVD., SUITE 201
MELBOURNE, FL 32901

**DO NOT WRITE
IN THIS SPACE**

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 Debra L. Bayer Debra Bayer 2-8-08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWNER RICHARDS, THOMAS 1717 AURORA ROAD MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWNER BEAHAN, JOE C 1717 AURORA ROAD MELBOURNE, FL 32935
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: Thomas Richards 2/7/08 321-259-3632
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #