

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031759

FILED
Apr 15, 2009
Secretary of State

Entity Name: TOW TELL MARINE SERVICES LLC

Current Principal Place of Business:

3301 RICKENBACKER CWSY
KEY BISCAYNE, FL 33149 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 490276
KEY BISCAYNE, FL 33149 US

New Mailing Address:

FEI Number: 43-2050301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TELLAM, HENRY S JR.
3301 RICKENBACKER CWSY
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

TELLAM, SANDRA L
3301 RICKENBACKER CWSY
KEY BISCAYNE, FL 33149 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: SANDRA L. TELLAM

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TELLAM, HENRY S JR
Address: 3301 RICKENBACKER CWSY
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM () Delete
Name: TELLAM, JEFFREY E
Address: 3301 RICKENBACKER CWSY
City-St-Zip: KEY BISCAYNE, FL 33149 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TELLAM, SANDRA L
Address: 3301 RICKENBACKER CWSY
City-St-Zip: KEY BISCAYNE, FL 33149 US

Title: MGRM (X) Change () Addition
Name: TELLAM, JOHN W
Address: 3301 RICKENBACKER CWSY
City-St-Zip: KEY BISCAYNE, FL 33149 US

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA L. TELLAM

MGRM

04/15/2009

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