2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000035572

HANSEN MARINE SERVICES, LLC



FILED Aug 14, 2006 08:00 A Secretary of State

Principal Place of Business

134 RIBERIA STREET UNIT 10 ST AUGUSTINE, FL 32084

Mailing Address

P.O. BOX 2771

PONTE VEDRA, FL 32004



07072006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1105163

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HANSEN, KATHRYN A 134 RIBERIA STREET UNIT 10 ST AUGUSTINE, FL 32084

DO NOT WRITE IN THIS SPACE

8-9-2006

Daytime Phone #

			THO OF AGE
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.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE
FII Due I	ing Fee is \$50.00 by September 6, 2006		000000574258 08/14/06-80007-005 50.00
9 ITILE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR HANSEN, KATHRYN A 134 RIBERIA STREET, UNIT 10 ST AUGUSTINE, FL 32084	·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-SY-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-7IP			· •• -

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.