

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90104 006 ****50.00

DOCUMENT # L04000038876					
1. Entity Name MARQUESA COVE, LLC				Principal Place of Business 5730 2ND AVE. STE. # 1 KEY WEST, FL 33040	
Mailing Address 5730 2ND AVE. STE. # 1 KEY WEST, FL 33040				2. Principal Place of Business	
3. Mailing Address				4. FEI Number 56-2462082	
Suite, Apt. #, etc.				Applied For Not Applicable	
City & State				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip		Country		City & State	
Zip		Country		City & State	
6. Name and Address of Current Registered Agent VAZQUEZ, RAYMOND 23 DRIFTWOOD DR. KEY WEST, FL 33040				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when relistating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SWIFT, JACK P 379 E 21ST. COSTA MESA, CA 92627	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Swift Jack P 379 E. 21 ST Costa Mesa CA 92627	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DAWSON, KEITH 15581 PLACID CIRCLE HUNTINGTON BEACH, CA 92647	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Dawson, Keith 15581 Placid Circle Huntington Beach CA 92647	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MACLEOD, DAVID A 2206 PACIFIC COAST HWY. HUNTINGTON BEACH, CA 92648	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Macleod David 2206 Pacific Coast Hwy. Huntington Beach CA 92648	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ROSS, HUGH 6471 BEACHVIEW DR. HUNTINGTON BEACH, CA 92648	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Ross Hugh 6471 Beachview Dr. Huntington Beach CA 92648	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Raymond Vazquez 23 Driftwood Dr Key West FL 33040	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member Vazquez, Raymond 23 Driftwood Dr Key West FL 33040	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____			Date 4-21-05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					