


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 15, 2008 8:00 am**  
**Secretary of State**

04-15-2008 90117 012 \*\*\*138.75

<b>DOCUMENT # L04000046433</b> 1. Entity Name 1944 BEACH BOULEVARD, LLC	
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Principal Place of Business 1944 BEACH BLVD JACKSONVILLE BEACH, FL 32250	Mailing Address 2315 BEACH BLVD JACKSONVILLE BEACH, FL 32250-4033
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**60023715**



04052008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 56-2472270	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent <del>STONEBURNER BERRY &amp; SIMMONS, P.A.</del> <i>Sidney Simmons</i> <del>841 PRUDENTIAL DRIVE STE 1400</del> <i>1050 Riverside Ave.</i> <del>JACKSONVILLE, FL 32207</del> <i>32204</i>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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	MGR ADVENTURE HOLDINGS, LLC 2315 BEACH BLVD, STE 203 JACKSONVILLE BEACH, FL 322504033
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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: *Henry P. Woodlin* 4/9/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #