

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048497

FILED
Aug 25, 2005
Secretary of State

Entity Name: CAT CAY YACHTS INTERNATIONAL SALES COMPANY, LLC

Current Principal Place of Business:

5212 WEST TYSON AVENUE
TAMPA, FL 33611

New Principal Place of Business:

2202 NORTH WEST SHORE BLVD
200
TAMPA, FL 33607

Current Mailing Address:

5212 WEST TYSON AVENUE
TAMPA, FL 33611

New Mailing Address:

4930 NEW PROVIDENCE AVENUE
TAMPA, FL 33629

FEI Number: 20-1372628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NICHOLS, STEPHEN R
5212 WEST TYSON AVENUE
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

BATTAGLIA, ROSS, DICUS & WEIN, P.A.
980 TYRON BLVD
ST PETERSBURG, FL 33743 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: HOWARD P. ROSS

08/25/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NICHOLS, STEPHEN R
Address: 5212 WEST TYSON AVENUE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: NICHOLS, STEPHEN R
Address: 4930 NEW PROVIDENCE AVE,
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEPHEN R NICHOLS

MR.

08/25/2005

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