2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# L04000063796

Entity Name: REDFISH MARINE CONSTRUCTION, LLC

Current Principal Place of Business:

285 LYNN DR.
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

285 LYNN DR.
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: 20-2518421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCLENDON, ROBERT BRANCH
388468 HWY. 98 W.
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

MCCLENDON, ROBERT BRANCH
285 LYNN DRIVE
SANTA ROSA BEACH, FL 32459 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: ROBERT BRANCH MCCLENDON 04/16/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: MCCLENDON, ROBERT BRANCH
Address: 71 THICK CIRCLE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: MGR ( ) Delete
Name: MCCLENDON, GLENN RAYMOND JR.
Address: 420 OAK HARBOR LANE, UNIT 201
City-St-Zip: DESTIN, FL 32541 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: MCCLENDON, ROBERT BRANCH
Address: 71 TRICK CIRCLE
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERT BRACNH MCCLENDON MGRM 04/16/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date