

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 28, 2008 08:00 AM**  
**Secretary of State**

|                                                                                          |                                                                                   |
|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # L04000068269</b><br>1. Entity Name<br><b>BANYAN BAY MARINE CENTER, LLC</b> |  |
|------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|

|                                                                                              |                                                                                      |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| Principal Place of Business<br><b>1815 CORDOVA RD<br/># 210<br/>FT. LAUDERDALE, FL 33316</b> | Mailing Address<br><b>1815 CORDOVA ROAD<br/>210<br/>FORT LAUDERDALE, FL 33316 US</b> |
|----------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|



01122008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

|                                    |                                                        |
|------------------------------------|--------------------------------------------------------|
| 4. FEI Number<br><b>20-2137852</b> | Applied For<br><input type="checkbox"/> 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<br><br><b>LOOS, JOHN T<br/>1815 CORDOVA ROAD #210<br/>FORT LAUDERDALE, FL 33316</b> |
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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

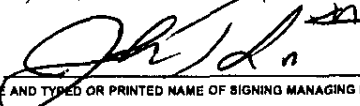
**FILE NOW!!! FEE IS \$138.75**  
**-After May 1, 2008 Fee will be \$538.75-**

| 9. MANAGING MEMBERS/MANAGERS                       |                                                                               |
|----------------------------------------------------|-------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | MGR<br>LOOS, JOHN T JR<br>1815 CORDOVA ROAD #210<br>FORT LAUDERDALE, FL 33316 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP |                                                                               |

**DO NOT WRITE  
IN THIS SPACE**

U000000843276  
03/11/08-80063-012 138.75

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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_