

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079362

Entity Name: FESTIVAL CRUISES LLC

FILED  
Apr 20, 2007  
Secretary of State

## Current Principal Place of Business:

433 N PALMETTO AVENUE  
SANFORD, FL 32771

## New Principal Place of Business:

125 BASIN STREET #131  
DAYTONA BEACH, FL 32114

## Current Mailing Address:

433 N PALMETTO AVENUE  
SANFORD, FL 32771

## New Mailing Address:

125 BASIN STREET #131  
DAYTONA BEACH, FL 32114

FEI Number: 20-1850041

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORDMAN, MICHAEL P  
112 N. FLORIDA AVENUE  
DELAND, FL 32720 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HOPKINS, EVELYN D  
Address: 433 N PALMETTO AVENUE  
City-St-Zip: SANFORD, FL 32771

Title: MGR ( ) Delete  
Name: HOPKINS, ROBERT L  
Address: 433 N. PALMETTO AVE.  
City-St-Zip: SANFORD, FL 32771

Title: MGR ( ) Delete  
Name: EVANS, JOHN E  
Address: 890 ORANGE CAMP ROAD  
City-St-Zip: DELAND, FL 32724

Title: MGR ( ) Delete  
Name: EVANS, MARY E  
Address: 890 ORANGE CAMP ROAD  
City-St-Zip: DELAND, FL 32724

## ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN E EVANS

MGR

04/20/2007

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