FILED May 14, 2007 8:00 am Secretary of State

05-14-2007 90368 039 ****50.00

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000083713 1. Entity Name
SHALLOW WATER EXPEDITIONS "L.L.C." Principal Place of Business Mailing Address 6 WATERCOLOR BLVD S **6 WATERCOLOR BLVD S UNIT 101** UNIT 101 SANTA ROSA BEACH, FL 32459 SANTA ROSA BEACH, FL 32459 05092007 No Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For 86-1126083 Not Applicable \$5.00 Additional 6. Name and Address of Current Registered Agent BRUER, GJURO DO NOT WRITE 6 WATERCOLOR BLVD S **UNIT 101** IN THIS SPACE SANTA ROSA BEACH, FL 32459 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, yourd or printed name of registered agent and late if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by September 14, 2007 MANAGING MEMBERS/MANAGERS TITLE BRUFR GJURO NAME STREET ADDRESS P.O. BOX 230 CITY-ST-ZIP POINT CLEAR, AL 36564 TITLE MGRM MANGUM, DAVID M NAME 210 MAGNOLIA CREEK ROAD STREET ADORESS CITY-ST-ZIP SANTA ROSA BEACH, FL 32459 TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TETLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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: