

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083713

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: SHALLOW WATER EXPEDITIONS "L.L.C."

**Current Principal Place of Business:**

6 WATERCOLOR BLVD S  
UNIT 101  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

6 WATERCOLOR BLVD S  
UNIT 101  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

FEI Number: 86-1126083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CONGLETON, BRAD CPA  
50 UPTOWN GRAYTON CIRCLE  
# 15  
SANTA ROSA BEACH, FL 32459 US

**Name and Address of New Registered Agent:**

BRAD CONGLETON CPA, INC.  
50 UPTOWN GRAYTON CIRCLE  
# 15  
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: BRAD CONGLETON

04/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BRUER, GJURO  
Address: P.O. BOX 230  
City-St-Zip: POINT CLEAR, AL 36564

Title: MGRM ( ) Delete  
Name: MANGUM, DAVID M  
Address: 210 MAGNOLIA CREEK ROAD  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

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 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: BRAD CONGLETON

RA

04/21/2009

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