2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 29, 2008
Secretary of State

DOCUMENT# L04000084482

Entity Name: ENDURANCE CHARTERS LLC

Current Principal Place of Business:

953 HILLSBORO MILE
C/O JOHN PARELL
HILLSBORO BEACH, FL 33062

New Principal Place of Business:

3233 NE 31ST AVE.
C/O JOHN F. PARELL
LIGHTHOUSE POINT, FL 33064

Current Mailing Address:

953 HILLSBORO MILE
C/O JOHN PARELL
HILLSBORO BEACH, FL 33062

New Mailing Address:

3233 NE 31ST AVE.
C/O JOHN F. PARELL
LIGHTHOUSE POINT, FL 33064

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PARELL, JOHN F
953 HILLSBORO MILE
HILLSBORO BEACH, FL 33062 US

Name and Address of New Registered Agent:

PARELL, JOHN F
3233 NE 31ST AVE.
LIGHTHOUSE POINT, FL 33064 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: _____ 05/29/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PARELL, JOHN F
Address: 953 HILLSBORO MILE
City-St-Zip: HILLSBORO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PARELL, JOHN F
Address: 3233 NE 31ST AVE.
City-St-Zip: LIGHTHOUSE POINT, FL 33064

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: JOHN F. PARELL MGRM 05/29/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date