


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90040 012 \*\*\*\*50.00

<b>DOCUMENT # L04000086231</b>			
1. Entity Name <b>CAPT. CURT'S TRAWLERS &amp; YACHTS, LLC</b>			
Principal Place of Business <b>6807 BROOKHAVEN PLACE BRADENTON, FL 34203</b>		Mailing Address <b>6807 BROOKHAVEN PLACE BRADENTON, FL 34203</b>	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4082005		Chg-LLC CR2E083 (10/03)	
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PERSSE, JOHN W 1800 2ND STREET SUITE 757 SARASOTA, FL 34236		Name <b>JOYCE E MARSH</b> Street Address (P.O. Box Number is Not Acceptable) <b>6807 BROOKHAVEN PLACE</b> City <b>BRADENTON</b> FL Zip Code <b>34203</b>	
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 <i>Joyce E Marsh</i> <b>JOYCE E MARSH</b>		DATE <i>April 21/05</i>	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MARSH, CURTIS M 6807 BROOKHAVEN PLACE BRADENTON, FL 34203 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MARSH JOYCE E 6807 BROOKHAVEN PL BRADENTON, FL 34203 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Joyce E Marsh</i> <b>JOYCE MARSH</b>		Date <i>April 21/05</i> 941-704-1091	