2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 24, 2006 8:00 am Secretary of State

1. Entity Name RIVERCITY MARINE, LLC						01-24-2006	90043 030 *	***5	0.00
SUITE 600 K ONE UNION	e of Business (RYSTAL BUILDING SQUARE GA, TN 37402	Mailing Address Suite 600 Krystal Building One Union Square Chattanooga, Tn 37402				III 89181 81111 86111 88111 88111	II BBIH BBIH IBBI BBIR	1 /14 1 1 141	100 (T) 100 T
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01092006	Chg-LLC	CR2E083 (11	/05)	
City & State		City & State			4. FEI Numi	222094			plied For t Applicable
Zip	Country	Zip Coun		try		e of Status Desired	□ \$5.00 Fee Re		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent					
NO AL OFF	1050 NO	Name							
NRAI SER 2731 EXE SUITE 4			Street Address	(P.O. Box Number is Not Acceptable)					
	FL 33331								
				City FL Zip Code					
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 Signature, typed or printed name of registered agent and trife if applicable. (NOTE: Registered Agent signature required when reinstating) OATE									
CALL COMPANY OF THE C									
Filing Fee is \$50.00 Due by May 1, 2006							e check payable Department of) .
9.	MANAGING MEMBERS/MANAGERS 10.					ADDITIONS/	CHANGES		
TITLE	MGR Delete		TITLE	: "				☐ Addition	
NAME	• •		NAM	E			_	-	_
STREET ADDRESS CITY-ST-ZIP	SUITE 600 KRYSTAL BUILDING		STREE						
				-ST-ZIP					
TITLE NAME	☐ Delete		TITLE				□ Ch	ange	Addition
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP			City	-ST-ZIP					
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NAME			HAM						
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NAME		Delete	TITLE				☐ Ch	inge	Addition
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IITĻE		☐ Delete	TITLE				☐ Ch	ange	☐ Addition
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CITY-ST-ZIP				ST-ZIP					
TITLE		☐ Delete	IIILE	 			☐ Ch	ange	Addition
NAME			NAMI	<u> </u>				-	
STREET ADDRESS				ET ADORESS					
CITY-SI-ZIP			┸	-ST-ZIP					
11. I hereby certify that the information supplied with this filing 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.									