2008 LIMITED LIABILITY COMPANY

Mar 14, 2008 08:00 AN Secretary of State **ANNUAL REPORT** DOCUMENT # L05000023340 CARIBEAN WATERS LLC Principal Place of Business Mailing Address 4475 LEGENDARY DRIVE 4475 LEGENDARY DRIVE DESTIN, FL 32541 US DESTIN, FL 32541 US 03042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2510380 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MATTHEWS, DANA C DO NOT WRITE 4475 LEGENDARY DRIVE DESTIN, FL 32541 IN THIS SPACE 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 title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOWIII FEE IS \$138.75 U00000858304 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR MATTHEWS, DANA C NAME 4475 LEGENDARY DRIVE STREET ADDRESS CITY-ST-ZIP DESTIN, FL 32541 TITI F NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE

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 frustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:	JAW	C. MULHINAM
SIGNATURE AND TYPED OR PRINTS	D NAME OF SIGNING MANAGING MEMBER	OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

FILED