

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025149

FILED
Mar 21, 2009
Secretary of State

Entity Name: FLOATING ADVENTURES, LLC

Current Principal Place of Business:

329 GRANELLO AVE
CORAL GABLES, FL 33146

New Principal Place of Business:

420 S. DIXIE HIGHWAY
4B
CORAL GABLES, FL 33146

Current Mailing Address:

329 GRANELLO AVE
CORAL GABLES, FL 33146

New Mailing Address:

420 S. DIXIE HIGHWAY
4B
CORAL GABLES, FL 33146

FEI Number: 20-2490807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES REGISTERED AGENTS, INC.
329 GRANELLO AVE
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

UNITED STATES REGISTERED AGENTS, INC.
420 S. DIXIE HIGHWAY
4B
CORAL GABLES, FL 33146 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: _____

03/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HOFMANN, JOHN L
Address: 329 GRANELLO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: FAY, MICHAEL T
Address: 95 MERRICK WAY, SUITE 380
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOFMANN, JOHN L
Address: 420 S. DIXIE HIGHWAY, SUITE 4B
City-St-Zip: CORAL GABLES, FL 33146

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: JOHN L. HOFMANN

MGRM

03/21/2009

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