

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

07 DEC 28 PM 1:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000044193

1. Entity Name
RIVERBOAT BETSY ANN, LLC



Principal Place of Business
781 CHOCTAWHATCHEE RIVER ROAD
BRUCE, FL 32455

Mailing Address
781 CHOCTAWHATCHEE RIVER ROAD
BRUCE, FL 32455



08302007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2900348

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARDY, RONALD E
781 CHOCTAWHATCHEE RIVER ROAD
BRUCE, FL 32455

**DO NOT WRITE
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)

DATE

Dec 26 2007

**Filing Fee is \$50.00
Due by September 14, 2007**

300110304683
10/17/07--01056--015 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
HARDY, RONALD E
781 CHOCTAWHATCHEE RIVER ROAD
BRUCE, FL 32455

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
HARDY, KATHRYN J
781 CHOCTAWHATCHEE RIVER ROAD
BRUCE, FL 32455

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ACKERMAN, RICHARD K
144 SANDOLLAR DRIVE
PANAMA CITY BEACH, FL 32408

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
ACKERMAN, NANCY L
144 SANDOLLAR DRIVE
PANAMA CITY BEACH, FL 32408

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

REINSTATEMENT

**DO NOT WRITE
IN THIS SPACE**

07

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

RICHARD ACKERMAN, MGR.