


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 17, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000055576**  
 1. Entity Name  
**MATANZAS PASS MARINA INVESTORS, LLC**



Principal Place of Business 2250FIRSTSTREET FT.MYERS,FL33901	Mailing Address 2250FIRSTSTREET FT.MYERS,FL33901
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**DO NOT WRITE IN THIS SPACE**



04142008No Chg-LLC CR2E083 (12/07)

4. FEI Number 84-1696779	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 ALOIA, FRANK J JR.  
 2250 FIRST STREET  
 FT. MYERS, FL 33901

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

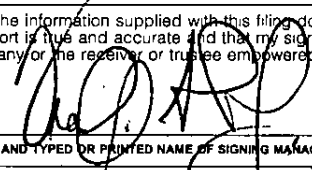
U00000903463  
 04/30/08-80047-010 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM A&R PARTNER HOLDINGS, LLC 2250 FIRST STREET FT. MYERS, FL 33901
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE IN THIS SPACE**

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:**  **Frank J. Aloia, Jr.,**  
 Managing Member  
 of A&R Partner Holdings, LLC,  
 Managing Member

Date: **4/15/08** (239) 791-7950

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