

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061336

Entity Name: AB-SEA FAMILY BOATING, LLC

FILED
Mar 31, 2006
Secretary of State

Current Principal Place of Business:

1250 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

10235 SW 53RD STREET
COOPER CITY, FL 33328

Current Mailing Address:

1250 NORTH FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Mailing Address:

10235 SW 53RD STREET
COOPER CITY, FL 33328

FEI Number: 11-3751844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 STREET, 4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: POULOS, ALAN F
Address: 1250 NORTH FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR () Delete
Name: ANDERSON, ELLEN S
Address: 1250 NORTH FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POULOS, ALAN F
Address: 10235 SW 53RD STREET
City-St-Zip: COOPER CITY, FL 33328

Title: MGR (X) Change () Addition
Name: ANDERSON, ELLEN S
Address: 10235 SW 53RD STREET
City-St-Zip: COOPER CITY, FL 33328

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN F POULOS

MGR

03/31/2006

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