

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000072237

Entity Name: LOW TIDE BOATS LLC

FILED
May 09, 2008
Secretary of State

Current Principal Place of Business:

2321 WELLS AVE
ALVA, FL 33920

New Principal Place of Business:

Current Mailing Address:

2321 WELLS AVE
ALVA, FL 33920

New Mailing Address:

FEI Number: 20-3194958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPILLER, JACK NICHOLAS SR
2321 WELLS AVE
ALVA, FL 33920 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: MGRM () Delete
Name: DANFORD, TODD J
Address: 4450 RIVER GROVE LN
City-St-Zip: FORT MYERS, FL 33905

Title: MGRM () Delete
Name: SPILLER, JACK NICHOLAS SR
Address: 2321 WELLS AVE
City-St-Zip: ALVA, FL 33920

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TODD DANFORD

MGRM

05/09/2008

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