2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081094

Entity Name: G-LOVE MARINE, L.L.C.

FILED Mar 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5000 SAWGRASS VILLAGE CIRCLE, SUITE 28 5000 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082

SUITE 3 PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

5000 SAWGRASS VILLAGE CIRCLE, SUITE 28 5000 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH, FL 32082

SUITE 3

PONTE VEDRA BEACH, FL 32082

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUSS, JOHN S ESQ C/O FORD, BOWLUS, DUSS, MORGAN, KENNEY, SA 10110 SAN JOSE BOÚLEVARD JACKSONVILLE, FL 32257 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

LAZZARA, GASPER Name: Name: LAZZARA, GASPER

Address: 5000 SAWGRASS VILLAGE CIRCLE, SUITE 28 Address: 5000 SAWGRASS VILLAGE CIRCLE, SUITE 3

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: GASPER LAZZARA 03/27/2009