2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 15, 2008
Secretary of State

DOCUMENT# L06000026981

Entity Name: THE BOATSLIP MANAGEMENT COMPANY, L.L.C.

Current Principal Place of Business:

333 FLEMING STREET
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

333 FLEMING STREET
KEY WEST, FL 33040 US

New Mailing Address:

FEI Number: 11-3774137 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, WAYNE L
333 FLEMING STREET
KEY WEST, FL 33040 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:	SERELIS, MARION	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	
Title:	MGRM	( ) Delete
Name:	BOTWAY, CLIFFORD	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	
Title:	MGRM	( ) Delete
Name:	JELESNIANSKI, ROBERT W	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	
Title:	MGRM	( ) Delete
Name:	HAROLD E. WOLFE, JR., REVOCABLE TRU S T	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	
Title:	MGRM	( ) Delete
Name:	GREEN, MARVA	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	
Title:	MGRM	(X) Delete
Name:	PAUL R. ANAPOL REVOC, ABLE TRUST	
Address:	333 FLEMING STREET	
City-St-Zip:	KEY WEST, FL 33040 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: MARVA GREEN MGRM 03/15/2008

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