

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030177

Entity Name: PERDIDO MARINA, LLC

FILED
Apr 13, 2007
Secretary of State

Current Principal Place of Business:

501 ST. JOHNS AVENUE
PALATKA, FL 32177

New Principal Place of Business:

164 LANTANA AVE
FLAGLER BEACH, FL 32415

Current Mailing Address:

501 ST. JOHNS AVENUE
PALATKA, FL 32177

New Mailing Address:

PO BOX 5050
OLD TOWN, FL 32680

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CLARK, RONALD E ESQ.
501 ST. JOHNS AVENUE
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

BEAN, BECKYJO
6278 NORTH FEDERAL HIGHWAY
430
FORT LAUDERDALE, FL 33308 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: BECKYJO BEAN

04/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KINNARD, CHARLIE
Address: PO BOX 505-0
City-St-Zip: HASTINGS, FL 32145

Title: P () Delete
Name: KINNARD, CHARLIE
Address: PO BOX 505-0
City-St-Zip: HASTINGS, FL 32145

Title: MGR () Delete
Name: SMITH, D. KEITH
Address: 164 LANTANA AVENUE
City-St-Zip: FLAGLER BEACH, FL 32145

Title: VP () Delete
Name: SMITH, D. KEITH
Address: 164 LANTANA AVENUE
City-St-Zip: FLAGLER BEACH, FL 32145

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KINNARD, CHARLIE
Address: PO BOX 5050
City-St-Zip: OLD TOWN, FL 32680

Title: P (X) Change () Addition
Name: KINNARD, CHARLIE
Address: PO BOX 5050
City-St-Zip: OLD TOWN, FL 32680

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 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: CHARLIE KINNARD

MGR

04/13/2007

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