

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000034882

FILED
Aug 22, 2007
Secretary of State

Entity Name: AQUARIAN MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

3809 PINEY GROVE DRIVE
TALLAHASSEE, FL 323113608

New Principal Place of Business:

Current Mailing Address:

3809 PINEY GROVE DRIVE
TALLAHASSEE, FL 323113608

New Mailing Address:

FEI Number: 20-4461437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRINGER, JAMES C
3809 PINEY GROVE DRIVE
TALLAHASSEE, FL 323113608 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: SPRINGER, JAMES C
Address: 3809 PINEY GROVE DRIVE
City-St-Zip: TALLAHASSEE, FL 323113608

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: HORN, ONNO
Address: 4821 U.S. HIGHWAY 98 W, SUITE 105
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGR () Change (X) Addition
Name: MARKHAM, CHRIS
Address: 155 CRYSTAL BEACH DRIVE
City-St-Zip: DESTIN, FL 32541

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: JAMES C. SPRINGER

MGRM

08/22/2007

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