

FILED
Jun 13, 2007 8:00 am
Secretary of State

05-09-2007 90035 022 ****55.00

**2007 LIMITED LIABILITY COMPANY
 ANNUAL REPORT (AR)**

DOCUMENT # L06000037013 1. Entity Name THE BOAT FLEET - LANTANA, LLC																																																																																			
Principal Place of Business 3238 CASSEEKEY ISLAND ROAD JUPITER FL 33477			Mailing Address 3238 CASSEEKEY ISLAND ROAD JUPITER FL 33477																																																																																
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																																																																	
City & State		City & State																																																																																	
Zip	Country	Zip	4. FEI Number 57-1235656		Applied For ☒ Not Applicable																																																																														
5. Certificate of Status Desired ☒		\$5.00 Additional Fee Required																																																																																	
6. Name and Address of Current Registered Agent EDGAR, CHARLES W III 8409 NORTH MILITARY TRAIL SUITE 123 PALM BEACH GARDENS FL 33410			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date of application. (NOTE: Registered Agent's signature required when re-appointing)																																																																																			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007																																																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>MGRM M. LEON MOORE 3238 Casseekey Island Rd Jupiter, FL. 33477</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>MGRM JON E. Marshall 3238 Casseekey Island Rd. Jupiter, FL. 33477</td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	MGRM M. LEON MOORE 3238 Casseekey Island Rd Jupiter, FL. 33477		STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE	MGRM JON E. Marshall 3238 Casseekey Island Rd. Jupiter, FL. 33477	☐ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 118, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u><i>M. Leon Moore</i></u> M. Leon Moore <u>4.10.07</u> <u>571-742-8980</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Deletion Photo #																																																																																			