

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045644

FILED
Jul 26, 2008
Secretary of State

Entity Name: SAIL OUR SHIPS LLC

Current Principal Place of Business:

2099 NORTH BEACH STREET
BUILDING 11
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

139 AVALON AVENUE
FLAGLER BEACH, FL 32136

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KANN, TERENCE
2790 NW 43RD STREET
SUITE 100
GAINESVILLE, FL 32606 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:

Title: MGRM () Delete
Name: NEJAME, JAMAL K
Address: 139 AVALON AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: ARRINGTON, EDWARD
Address: 10 FELICIA COURT
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: NEJAME, CHRISTINE
Address: 139 AVALON AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

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:

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: CHRISTINE NEJAME

MGRM

07/26/2008

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