

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060139

FILED  
Apr 09, 2008  
Secretary of State

**Entity Name:** GULF COAST UNDERWATER SERVICES LLC

**Current Principal Place of Business:**

1407 STERLING POINT DR  
GULF BREEZE, FL 32563

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 201  
GULF BREEZE, FL 32562

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BODE, RICHARD C  
1407 STERLING POINT DR  
GULF BREEZE, FL 32563 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: MGR ( ) Delete  
Name: DAEHNE, JAMES  
Address: 170 DEERFOOT LN  
City-St-Zip: CANTONMENT, FL 32533

Title: MGR ( ) Delete  
Name: BODE, RICHARD  
Address: P.O. BOX 864  
City-St-Zip: GULF BREEZE, FL 32562

**ADDITIONS/CHANGES:**

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: RICHARD C BODE

MR.

04/09/2008

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