2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000086924

1. Entity Name

306 ROYAL MARINER, L.L.C.



Mailing Address

Principal Place of Business 12201 N.W. 5TH STREET PLANTATION, FL 33325

12201 N.W. 5TH STREET PLANTATION, FL 33325

FILED May 02, 2008 08:00 AN Secretary of State



04122008 No Chg-LLC

CR2E083 (12/07)

954-472-1099

Daylime Phone #

5.	Certificate of Status Desired	□ \$5.	00	Additional
	20-5497731		Γ	Not Applicable
4.	FEI Number			Applied For

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6. Name and Address of Current Registered Agent

ACORD, LINDA L 12201 NW 5TH ST PLANTATION, FL 33325

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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						
3.GIATORE.	Signature, typed or printed name of registered agent and tide if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE			
	NOW!!! FEE IS \$138.75 , 1, 2008 Fee will be \$538.75		U00000944648 05/29/08-80107-022 138.75			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ACORD, WILBUR R 12201 N.W. 5TH STREET PLANTATION, FL 33325					
NAME STREET ADDRESS CITY-ST-ZIP	MGR ACORD, LINDA L 12201 N.W. 5TH STREET PLANTATION, FL 33325					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE			
TITLE NAME STREET ADDRESS CITY+ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.						

Linda L. Acord

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE