


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000100633

1. Entity Name
SHE MARINE, LLC



Principal Place of Business
**843 S.W. 24TH AVE.
 OKEECHOBEE, FL 34974**

Mailing Address
**843 S.W. 24TH AVE.
 OKEECHOBEE, FL 34974**



02202008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 56-2620414	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**ENFINGER, HAROLD E
 843 S.W. 24TH AVE.
 OKEECHOBEE, FL 34974**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

0000000256889
 03/28/08-80030-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ENFINGER, HAROLD E 843 S.W. 24TH AVE. OKEECHOBEE, FL 34974
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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 I am otherwise empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *H. E. Enfinger* **3/11/08** **863-447-0007**
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #