

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057898

FILED  
Mar 26, 2008  
Secretary of State

**Entity Name:** ACROPHOBIC ASCENTS WATERSPORTS LLC

**Current Principal Place of Business:**

139 SCOTTWOOD DR  
FT. WALTON BEACH, FL 32548

**New Principal Place of Business:**

1431 JOHN STEINBECK DR.  
NICEVILLE, FL 32578

**Current Mailing Address:**

139 SCOTTWOOD DR  
FT. WALTON BEACH, FL 32548

**New Mailing Address:**

1431 JOHN STEINBECK DR.  
NICEVILLE, FL 32578

**FEI Number:** 20-8535231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFFMASTER, MATTHEW D  
139 SCOTTWOOD DR  
FT. WALTON BEACH, FL 32548 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: HOFFMASTER, MATTHEW  
Address: 139 SCOTTWOOD DR  
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: MGRM ( ) Delete  
Name: CLAYTON WILSON, WARREN J  
Address: 607 A WEST SUNSET BLVD  
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: MGRM ( ) Delete  
Name: HOFFMASTER, KAREN  
Address: 1431 JOHN STEINBECK DR  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: COOK, KAREN H  
Address: 1431 JOHN STEINBECK DR  
City-St-Zip: NICEVILLE, FL 32578

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: KAREN H. COOK

MGRM

03/26/2008

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