

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90030 017 ***138.75

60034384



DOCUMENT # L07000102458
 1. Entity Name
 CAPTAIN RAND'S MARINE SERVICE, LLC



Principal Place of Business
 3687 DORAL STREET
 PALM HARBOR, FL 34685

Mailing Address
 3687 DORAL STREET
 PALM HARBOR, FL 34685

2. Principal Place of Business - No P.O. Box #
 135 Orange St.

3. Mailing Address
 150 BANYAN BAY DR

Suite, Apt. #, etc.

04092008 Chg-LLC CR2E083 (12/06)

City & State
 PALM HARBOR, FL

City & State
 ST. PETERSBURG, FL

4. FEI Number
 26-1366207

Applied For
 Not Applicable

Zip
 34684

Country
 USA

Zip
 33705

Country
 USA

5. Certificate of Status Desired \$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent

VALENTIN, RANDOLPH W.
 3687 DORAL STREET
 PALM HARBOR, FL 34685

7. Name and Address of New Registered Agent

Name: _____

Street Address (P.O. Box Number is Not Acceptable)
 150 BANYAN BAY DRIVE

City
 ST. PETERSBURG

FL

Zip Code
 33705

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: *[Signature]* RANDOLPH W VALENTIN 4/09/08

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reorganizing)

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

Make check payable to
 Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGR	VALENTIN, RANDOLPH W	3687 DORAL STREET	PALM HARBOR, FL 34685	<input checked="" type="checkbox"/>
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		150 BANYAN BAY DRIVE	ST PETERSBURG FL 33705	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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 prepare this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* 4/09/08 727 742 8551

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #