## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000046716

Entity Name: EMERALD CITY EXPEDITIONS, LLC

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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421 S. SUNSET DR.

CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

421 S. SUNSET DR. P.O. BOX 180096

CASSELBERRY, FL 32707 US CASSELBERRY, FL 32718 US

FEI Number: 26-2738530 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FORNEY, RICHARD M 8100 CHAMPIONS GATE CR. #201 CHAMPIONS GATE, FL 33896 US

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.

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SIGNATURE: Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GENTRY, SEAN A
 Name:

 Address:
 421 S. SUNSET DR.
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 FORNEY, RICHARD M
 Name:

 Address:
 8100 CHAMPIONS GATE CIR. #201
 Address:

 City-St-Zip:
 CHAMPIONS GATE, FL 33896 US
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 JONES, STEVEN
 Name:

 Address:
 170 KELTON ST. APT. 15
 Address:

 City-St-Zip:
 ALLSTON, MA 02134 US
 City-St-Zip:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SPOERER, LUZ-MARY
 Name:

 Address:
 2831 CURVING OAKS WAY
 Address:

 City-St-Zip:
 ORLANDO, FL 32820 FL
 City-St-Zip:

 Name:
 GENTRY, LEYNA
 Name:

 Address:
 421 S. SUNSET DR.
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Title: MGRM (X) Delete Title: ( ) Change ( ) Addition

 Name:
 FULLWOOD, JOSH
 Name:

 Address:
 7802 PINE CROSSING CIR. APT. #1632
 Address:

 City-St-Zip:
 ORLANDO, FL 32807 US
 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: S. ALEXANDER GENTRY MGRM 04/29/2009