

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000070538

FILED  
May 21, 2009  
Secretary of State

**Entity Name:** ARISTAKAT CHARTERS, LLC.

**Current Principal Place of Business:**

1209 SAVERY STREET  
NORTHPORT, FL 34287 US

**New Principal Place of Business:**

**Current Mailing Address:**

1209 SAVERY STREET  
NORTHPORT, FL 34287 US

**New Mailing Address:**

FEI Number: 26-3030224      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

BOSTWICK, JAMES  
1209 SAVERY STREET  
NORTHPORT, FL 34287 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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BOSTWICK, JAMES  
Address: 1209 SAVERY STREET  
City-St-Zip: NORTHPORT, FL 34287 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JAMES R BOSTWICK

MGR

05/21/2009

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