

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000000906

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** CARLSON MARITIME TRAVEL, LLC

**Current Principal Place of Business:**

623 E. TARPON AVENUE  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

561 OLD EAST LAKE ROAD  
SUITE B  
TARPON SPRINGS, FL 34688 US

**New Mailing Address:**

**FEI Number:** 27-1604638      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CARLSON, SUZANNE  
623 E TARPON AVE  
TARPON SPRINGS, FL 34689 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:** PRES  
**Name:** CARLSON, SUZANNE  
**Address:** 561 OLD EAST LAKE RD. SUITE B.  
**City-St-Zip:** TARPON SPRINGS, FL 34688 US

I hereby 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: SUZANNE CARLSON      PRES      01/04/2012

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