

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000111031

FILED
Jan 06, 2010
Secretary of State

Entity Name: APALACHICOLA HISTORIC TOURS, LLC

Current Principal Place of Business:

17 1/2 AVENUE E
APALACHICOLA, FL 32320

New Principal Place of Business:

329 WATER STREET
APALACHICOLA, FL 32320

Current Mailing Address:

POST OFFICE BOX 729
APALACHICOLA, FL 32329

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBLE, LEIGH
17 1/2 AVENUE E
APALACHICOLA, FL 32320 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: MGRM
Name: ALLYN ASSOCIATES, INC.
Address: 17 1/2 AVENUE E
City-St-Zip: APALACHICOLA, FL 32320

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: CURT BLAIR FOR ALLYN ASSOCIATES INC.

MGR

01/06/2010

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