


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # L96000000584		
1. Entity Name KITTYHAWK BOAT L.C.		
Principal Place of Business 1634 MAIN STREET SARASOTA, FL 34236		Mailing Address P.O. BOX 3319 SARASOTA, FL 34230
4. FEI Number 65-0684756		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent		
FAMIGLIO, GEORGE V JR 1634 MAIN STREET SARASOTA, FL 34236		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
DATE _____		
Filing Fee is \$50.00 Due by May 1, 2004		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM M. OLIVIA CORP. POST OFFICE BOX 3319 SARASOTA, FL 34230	U00000131794 04/27/04-80018-025 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM MOBY L.P. POST OFFICE BOX 3319 SARASOTA, FL 34230	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SARASOTA MARINE PERFORMANCE, INC. POST OFFICE BOX 3319 SARASOTA, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 execute this report as required by Chapter 606, Florida Statutes.		
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE</small>		
		<small>Date</small> _____ <small>Daytime Phone #</small> _____