## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L96000001219

1. Entity Name
THE LOWER APALACHICOLA STEAMSHIP LIMITED
COMPANY



FILED Jan 13, 2004 08:00 AM Secretary of State

Principal Place of Business 573 EAST GORRIE DRIVE ST. GEORGE ISLAND, FL 32328 Mailing Address

573 EAST GORRIE DRIVE ST. GEORGE ISLAND, FL 32328



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01062004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3441842 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

BEAN, MASON 573 EAST GORRIE DRIVE ST. GEORGE ISLAND, FL 32328

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8,	i. The above named entity submits this statement for the purpose of changing its registered critice of registered agent, of both, it	n the State of Florida.	esti istillist with, sho sc	cepi
	the obligations of registered agent.			
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(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
THEE NAME STREET ADDRESS CRY-ST-ZIP	MGRM BEAN, MASON 573 EAST GORRIE DRIVE ST. GEORGE ISLAND, FL 32328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CRY-ST-ZIP	
ntle Name Street address City-St-Zip	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

01/14/04-80003-009 50.00

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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 608, Florida Statutes.

SIGNATURE: All

1-11-04

850-927-3100