



**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 02, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L97000000310</b> 1. Entity Name A & B MARINA, L.C.	
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Principal Place of Business 700 FRONT STREET KEY WEST, FL 33040	Mailing Address 700 FRONT STREET KEY WEST, FL 33040
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<b>DO NOT WRITE IN THIS SPACE</b>
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07092004 No Chg-LLC	CR2E083 (10/03)
4. FEI Number 65-0735577	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  SMITH, WILLIAM A 700 FRONT STREET KEY WEST, FL 33040
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$50.00  
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM R A ROMANOFF-TRUSTEE OF SMITH FAMILY TRUST 30 NORTH LASALLE STREET, STE 3526 CHICAGO, IL 60602
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BAYHAVEN ENTERPRISES, L.C. 700 FRONT STREET KEY WEST, FL
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<p>U00000169190 08/02/04-80014-011 50.00</p>          <b>DO NOT WRITE IN THIS SPACE</b>
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11. I hereby certify that the information supplied with this filing 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.

<b>SIGNATURE:</b> 	7/9/04	305-294-4902
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>