


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000001065 1. Entity Name NAUTICAL HOLDINGS, L.L.C.	
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Principal Place of Business 19345 U.S. HIGHWAY 19 NORTH, 4TH FLOOR CLEARWATER, FL 34624	Mailing Address 19345 U.S. HIGHWAY 19 NORTH, 4TH FLOOR CLEARWATER, FL 34624
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07092004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3522485	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent WARSHAW, ARTHUR H 19345 U.S. HIGHWAY 19 NORTH, 4TH FLOOR CLEARWATER, FL 34624	DO NOT WRITE IN THIS SPACE
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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 reinstating)

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

U000000167911
07/23/04-80001-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR VANDERLIP, HENRIK N 133 RIVER ROAD COS COB, CT 06807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR WARSHAW, ARTHUR H 19345 U.S. HIGHWAY 19 NORTH, 4TH FLOOR CLEARWATER, FL 34624
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 7/20/04 Daytime Phone #: 727-530-5424