


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L99000005778	
1. Entity Name BYFIELD MARINE SUPPLY, L.L.C.	

Principal Place of Business 175 E. OLIVE RD. PENSACOLA, FL 32514	Mailing Address 175 E. OLIVE RD. PENSACOLA, FL 32514
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03222007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3599711	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 HUSTON, GARY W 125 W. ROMANA STREET, SUITE 800 PENSACOLA, FL 32501

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

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04/10/07-80038-021 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BYFIELD, FREDERIC W 175 E. OLIVE RD. PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM BYFIELD, SUZANNE 175 E. OLIVE RD. PENSACOLA, FL 32514
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Fred W. Byfield Jr.* **850-477-8011**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #