2005 LIMITED LIABILITY COMPANY

FILED
Jan 19, 2005 08:00 AM
Secretary of State

ANNUAL REPORT				Jan 19, 2005 08:00 A	
 Entity Nam 	MENT # M0000000032 R MARINE, L.L.C.	· .		Sec	cretary of State
Principal Place 2500 EAST I SPRINGFIELD	-	EARNEY		 	
DO NOT WRITE IN THIS SPA			CE	01052005No Chg-LLC 4. FEI Number 43-1686170 5. Certificate of Status Desired	CR2E083 (10/03) Applied For Not Applicable \$5.00 Additional Fee Required
	6. Name and Address of Current Registered Agent				ş
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for the purpose of chions of registered agent.				
Fi Di	Sgrature, typed or printed name of registered agent and title if applicable. Illing Fee is \$50.00 ue by May 1, 2005	(NOTE Registere	d Agent signalure required	when reinstating)	DATE
9.	MANAGING MEMBERS/MANAGERS		1		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM THREE JOHN'S COMPANY 2500 E. KEARNEY SPRINGFIELD, MO 65898	- 	-	1/00900 01/29/0S-	0184673 -80040-003 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP			-	DO NOT W	
TITLE NAME STREET ADDRESS					

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 reverse previously for trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

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

7-05

Daytime Phone #