
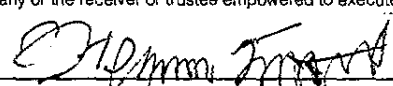



**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 11, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M03000000455</b> 1. Entity Name BOATSHARE, LLC		
Principal Place of Business 5257 BEECHTREE TRAIL WEST BLOOMFIELD, MI 48322		Mailing Address 5257 BEECHTREE TRAIL WEST BLOOMFIELD, MI 48322
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  WILSEY, DAVID F ESQ. 275 FOURTH STREET, NORTH ST. PETERSBURG, FL 33701		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FRANKEL, HERMAN 5257 BEECHTREE TRAIL WEST BLOOMFIELD, MI 48322	<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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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.		
SIGNATURE:  HERMAN FRANKEL 3/15/05 248-601-1100 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		

	
03052005 No Chg-LLC CR2E083 (10/03)	
4. FEI Number 33-1040498	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

U00000259487  
03/11/05-80026-014 50.00