2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M0600000338

1. Entity Name YACHT-MATE GP, LLC



FILED Apr 30, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

5944 ZANGS DR. SAN ANTONIO, TX 78238 5944 ZANGS DR. SAN ANTONIO, TX 78238

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01162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3582912

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301

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	ove named entity submits this statement for the purpose of cha gations of registered agent.	nging its registered	d office or registered agent, or bol	th, in the State of Florida. I am familiar with, and accept
SIGNATUR				
Signature, typed or printed itamic of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)		DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				U00000936353 05/27/08-80007-013 138.75
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			

CAMMACK, JOHN D NAME STREET ADDRESS 5944 ZANGS DR. CITY-ST-ZIP SAN ANTONIO, TX 78238 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TOTLE NAME STREET ADDRESS CITY-ST-ZIP FITLE NAME STREET ADDRESS CITY - ST-ZIP 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 exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accordate 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 legal effect as required by Chapter 608. Florida Statutes.

SIGNATURE: _______

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

4/22/01

210-587-3456

Daytime Phone #