2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000227638

Entity Name: EVERGLADES ANGLING ADVENTURES LLC

FILED May 01, 2017 **Secretary of State** CC1103603460

Current Principal Place of Business:

4 SILVER SPRINGS DR. KEY LARGO. FL 33037

Current Mailing Address:

4 SILVER SPRINGS DR. KEY LARGO. FL 33037 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRELSON, JOHN 4 SILVER SPRINGS DR. KEY LARGO, FL 33037 US

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.

Title

MGR

SIGNATURE:

Title

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail: MGR

| | | | - |
|---------|----------------------|---------|----------------------|
| Name | HARRELSON, JOHN | Name | HARRELSON, JOHN |
| Address | 4 SILVER SPRINGS DR. | Address | 4 SILVER SPRINGS DR. |

KEY LARGO FL 33037 City-State-Zip: City-State-Zip: KEY LARGO FL 33037

Title MGR Title MGR

Name HARRELSON, JOHN Name HARRELSON, JOHN Address 4 SILVER SPRINGS DR. Address 4 SILVER SPRINGS DR. KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037 City-State-Zip:

Title MGR Title MGR

Name HARRELSON, JOHN Name HARRELSON, JOHN Address 4 SILVER SPRINGS DR. Address 4 SILVER SPRINGS DR. City-State-Zip: KEY LARGO FL 33037 City-State-Zip: KEY LARGO FL 33037

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN G. HARRELSON

MANAGER

05/01/2017