2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000004308

1. Entity Name

ISLAND MON INVESTMENTS, LLC



Mailing Address

DO NOT WRITE IN THIS SPACE

2614 TAMIAMI TRAIL NORTH, STE. 700 NAPLES, FL 34103

Principal Place of Business

2614 TAMIAMI TRAIL NORTH, STE. 700 NAPLES, FL 34103 FILED Mar 19, 2004 08:00 AM Secretary of State



02242004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 75-3005740 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NOVATT, JEFF M ESQ. CHEFFY, PASSIDOMO, WILSON & JOHNSON LLP 821 FIFTH AVENUE SOUTH, STE. 201 NAPLES, FL 34102

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and life if applicable.	(NOTE Registered Agent signature required when reinstaling)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			U00000032834 03/19/04-80024-023 50.00
9.	MANAGING MEMBERS/MANAGERS		The second secon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHUCART, JAMES 2641 TAMIAMI TRL STE 700 NAPLES, FL 34103		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CUTY-ST-ZIP			

11. I hereby certify that the information supplied with this filling 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 sugneture shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empoyered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

3/16/04

Daytime Phone #