

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000070209

FILED
May 01, 2008
Secretary of State

Entity Name: SHELL FANTASY OF ISLAMORADA, LLC

Current Principal Place of Business:

81905 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Principal Place of Business:

Current Mailing Address:

81905 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 20-3159508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CATARINEAU, JOE A ESQ
91760 OVERSEAS HIGHWAY
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAKER, MICHAEL
Address: P.O. BOX 1107
City-St-Zip: KEY LARGO, FL 33037

Title: MGRM () Delete
Name: CACHIA, JOE
Address: P.O. BOX 1163
City-St-Zip: ISLAMORADA, FL 33036

Title: MGRM () Delete
Name: BAKER, CANDICE
Address: P.O. BOX 1107
City-St-Zip: KEY LARGO, FL 33037

Title: MGRM () Delete
Name: D'AMATO, DEBRA
Address: P.O. BOX 1163
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JOE CACHIA

MGR

05/01/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date