

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053269

FILED
Apr 21, 2008
Secretary of State

Entity Name: ORANGE ISLE PARTNERS, LLC

Current Principal Place of Business:

219 NE 17TH AVENUE
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

313 NE 2ND STREET, UNIT 805
FORT LAUDERDALE, FL 33301 US

Current Mailing Address:

219 NE 17TH AVENUE
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

313 NE 2ND STREET, UNIT 805
FORT LAUDERDALE, FL 33301 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YATES, CHRISTINE P ESQ.
C/O TRIPP SCOTT P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33301 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: MGR () Delete
Name: SMITH, JAMIE L
Address: 219 NE 17TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: MGR () Delete
Name: HAINES, JAMES JEFFREY
Address: 219 NE 17TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33301 US

ADDITIONS/CHANGES:

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: JAMES JEFFREY HAINES MGR 04/21/2008

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