2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 23, 2007 08:00 A Secretary of State **DOCUMENT # L0000001552** 1. Entity Name ISLAND HOSPITALITY, LLC Principal Place of Business Mailing Address 420 DOCK ST. P.O. BOX 181 CEDAR KEY, FL 32625 CEDAR KEY, FL 32625 04172007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 52-2220500 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301 IN THIS SPACE nent 📭 the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation Signature, typed or printed name of registered agent and title d applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS TITLE MGRM BRANDT, LINDA M NAME STREET ADDRESS 1026 WHIDDON AVE. CEDAR KEY, FL. 32625 CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME · U00000723959 STREET ADDRESS 05/02/07-80092-010 50.00

11. I hereby certify that the information supplied with this filling 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 accurate 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP