2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000001700

Entity Name: ISLAMORADA PARTNERS, LLC

GRAMMEN, ROBERT

NAPLES, FL 34109

9180 GALLERIA COURT, SUITE 600

Name:

Address:

City-St-Zip:

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4880 SYCAMORE DRIVE NAPLES, FL 34119 **Current Mailing Address: New Mailing Address:** 4880 SYCAMORE DRIVE NAPLES, FL 34119 FEI Number: 65-0980828 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AYRES, JOHN 123 EAST AVENUE NAPLES, FL 34108 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. SIGNATURE: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete AYRES, JOHN E Name: Name: 123 EAST AVENUE Address: Address: City-St-Zip: NAPLES, FL 34108 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BLANKENSHIP, LARRY Name: Address: 4880 SYCAMORE DR Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ESPING, WILLIAM Name: Name: Address: 2828 ROUTH STREET Address: City-St-Zip: DALLAS, TX 75201 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: FRENI, JOSEPH JR Name: 2351 WINDWARD WAY Address: Address: City-St-Zip: NAPLES, FL 34103 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: LARRY S. BLANKENSHIP MGRM 04/30/2004