2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001368

Entity Name: ISLAND DIVERSIFIED HOLDINGS, LLC

FILED Feb 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2025 S. TROPICAL TRAIL

MERRITT ISLAND, FL 32952

508 S. PLUMOSA STREET

MERRITT ISLAND, FL 32952

MERRITT ISLAND, FL 32952

Current Mailing Address: New Mailing Address:

508 S. PLUMOSA STREET MERRITT ISLAND, FL 32952

FEI Number: 59-3720717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FOWLER, BRINK & MOSES, P.A. 25 MCCLEOD STREET MERRITT ISLAND, FL 32952 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

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name: ELDRIDGE, PETER A
Address: 2025 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Name: ELDRIDGE, PETER A
Address: 508 S. PLUMOSA STREET
City-St-Zip: MERRITT ISLAND, FL 32952

MERRITT ISLAND, FL 32952

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 ELDRIDGE, PATRICIA A
 Name:

 Address:
 2025 S. TROPICAL TRAIL
 Address:

 City-St-Zip:
 MERRITT ISLAND, FL 32952
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER A. ELDRIDGE MGR 02/05/2007