2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014531

Entity Name: ISLAND CROWNE DEVELOPERS, LC

FILED Jun 05, 2009 Secretary of State

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

220 SOUTH PALACOX PLACE 1 SLEIMAN PARKWAY

PENSACOLA, FL 32502 SUITE 270

JACKSONVILLE, FL 32216

Current Mailing Address: New Mailing Address:

PO BOX 111 1 SLEIMAN PARKWAY

PENSACOLA, FL 32591 SUITE 270

JACKSONVILLE, FL 32216

FEI Number: 02-0586416 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: Name and Address of New Registered Agent:

ABRAM, JEFFREY P WHITE, ROBERT K 5464 LIMESTONE ROAD 1 SLEIMAN PARKWY PENSACOLA, FL 32504 US SUITE 270

PENSACOLA, FL 32504 US SUITE 270
JACKSONVILLE, FL 32216 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: ROBERT K. WHITE 06/05/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MCALPIN, RICHARD R
 Name:

 Address:
 220 SOUTH PALAFOX PLACE
 Address:

 City-St-Zip:
 PENSACOLA, FL 32502
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SLEIMAN, ANTHONY T
 Name:

 Address:
 1 SLEIMAN PARKWAY, SUITE 270
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32216
 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: ROBERT K. WHITE RA 06/05/2009