2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2004
Secretary of State

DOCUMENT# L02000027257

Entity Name: ISLAND CURBS, LLC

Current Principal Place of Business:

315 PINE AVENUE
ANNA MARIA, FL 34216

New Principal Place of Business:

Current Mailing Address:

PO BOX 728
ANNA MARIA, FL 342160728

New Mailing Address:

FEI Number: 04-3716982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, BARNES
3119 MANATEE AVENUE WEST
BRADENTON, FL 34205 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/MEMBERS:

Title: MGR ( ) Delete
Name: BELL, JAMES C
Address: PO BOX 728
City-St-Zip: ANNA MARIA, FL 342160728

Title: MGR ( ) Delete
Name: BELL, PATRICIA D
Address: PO BOX 728
City-St-Zip: ANNA MARIA, FL 342160728

Title: MGR ( ) Delete
Name: BELL, AMANDA J
Address: PO BOX 728
City-St-Zip: ANNA MARIA, FL 342160728

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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.

SIGNATURE: JAMES C BELL MGR 06/30/2004

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