## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031101

Entity Name: PILGRIM OF THE ISLES, L.L.C.

**FILED** May 09, 2008 Secretary of State

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

1825 48TH AVE 7 SAILFISH RD

VERO BEACH, FL 32966 VERO BEACH, FL 32960

**Current Mailing Address: New Mailing Address:** 

411 WALNUT ST #3496

GREEN COVE SPRINGS, FL 32043

FEI Number: 43-1990156 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:

GARRIS, CHARLES E 819 BEACHLAND BLVD VERO BEACH, FL 32963 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

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

NORCONK, KATHLEEN J NORCONK, KATHLEEN J Name: Name: Address: 2 STARFISH DRIVE Address: 7 SAILFISH RD City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: VERO BEACH, FL 32960

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

NORCONK, JAMES J III Name: Name: Address: 1825 48TH AVENUE Address: City-St-Zip: VERO BEACH, FL 32966 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: KATHLEEN J NORCONK **MGRM** 05/09/2008