2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000009668

ISLAND BOYS, L.L.C.



FILED May 01, 2006 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

548 US HWY 27

548 US HWY 27

STE C MINNEOLA, FL 34715

STE C

MINNEOLA, FL 34715



DO NOT WRITE IN THIS SPACE

03212006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 30-0164637

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HESSBURG, DANIEL J 548 US HWY 27 STE C MINNEOLA, FL 34715

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

Filing Fee Is \$50.00 Due by May 1, 2006

9,	MANAGING MEMBERS/MANAGERS
ITTLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HESSBURG, DANIEL J 548 US HWY 27 STE C MINNEOLA, FL 34715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	NUMBERCO, FL 347 13
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the ex-	

U00000551478 05/13/06-80102-013 50.00

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplies with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

06

Daytime Phone #