2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 08, 2006
Secretary of State

DOCUMENT# L03000018386

Entity Name: ISLAND ROYALTY LLC

Current Principal Place of Business:

224 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937 US

New Principal Place of Business:

PO BOX 33278
INDIALANTIC, FL 32903 US

Current Mailing Address:

224 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937 US

New Mailing Address:

PO BOX 33278
INDIALANTIC, FL 32903 US

FEI Number: 76-0742076 **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:

PRINCE, VERNON G
224 LANSING ISLAND DRIVE
INDIAN HARBOUR BEACH, FL 32937 US

Name and Address of New Registered Agent:

PRINCE, VERNON G
108 ISLAND VIEW DRIVE
INDIAN HARBOUR BEACH, FL 32937 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: _____ 08/08/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PRINCE, VERNON G
Address: 224 LANSING ISLAND DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PRINCE, VERNON G
Address: 108 ISLAND VIEW DRIVE
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

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: VERNON PRINCE MGRM 08/08/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date