2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000025091

Entity Name: ISLANDER ST. AUGUSTINE, L.L.C.

FILED Oct 25, 2004 Secretary of State

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

5366 FIFTH STREET 442 OCEAN FOREST DRIVE ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

5366 FIFTH STREET 442 OCEAN FOREST DRIVE ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

FEI Number: 41-2109154 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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:

BROWN, RONALD W 66 CUNA STREET, SUITE A ST. AUGUSTINE, FL 32084 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:

Name:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

MGR () Delete BRUSHER, JOAN M

Address: 5366 FIFTH STREET
City-St-Zip: ST. AUSUTINE, FL 32080

Title: MGR () Delete
Name: COLE, SCOTT III
Address: 311 WEFF ROAD

City-St-Zip: ST. AUSUTINE, FL 32080

 Title:
 MGR
 () Delete

 Name:
 WERNICK, KEITH

 Address:
 32 LOUISE STREET

 City-St-Zip:
 ST. AUSUTINE, FL 32095

 Title:
 MGR
 () Delete

 Name:
 BRUSH, JOAN M

 Address:
 5366 FIFTH STREET

 City-St-Zip:
 ST. AUSUTINE, FL 32080

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition

Name: BRUSH, JOAN M

Address: 442 OCEAN FOREST DRIVE City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR (X) Change () Addition

Name: COLE, SCOTT III

Address: 442 OCEAN FOREST DRIVE City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR (X) Change () Addition

 Name:
 WERNINCK, KEITH

 Address:
 32 LOUISE STREET

 City-St-Zip:
 ST. AUSGUTINE, FL 32095

Title: MGR (X) Change () Addition

Name: BRUSH, JOAN M

Address: 442 OCEAN FOREST DRIVE City-St-Zip: ST. AUGUSTINE, FL 32080

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: JOAN M. BRUSH MGRM 10/25/2004