

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040380

FILED
Apr 16, 2009
Secretary of State

Entity Name: ISLAMORADA PROPERTIES, LLC

Current Principal Place of Business:

16104 82ND RD N
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

Current Mailing Address:

16104 82ND RD N
LOXAHATCHEE, FL 33470 US

New Mailing Address:

FEI Number: 55-0852371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SNYDER, SHAWN C
7931 SW 45TH STREET
DAVIE, FL 33328 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/MANAGERS:

Title: MGRM () Delete
Name: BUFO, ANTHONY J
Address: 16104 82ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: MEIER, GAIL L
Address: 16104 82ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM () Change (X) Addition
Name: BUFO, BERNADETTE
Address: 16104 82ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: MGRM () Change (X) Addition
Name: BUFO, ARTHUR J
Address: 2108 BRADFORD ST
City-St-Zip: CLEARWATER, FL 33760

Title: MGRM () Change (X) Addition
Name: COCHRAN, MORGAN Q
Address: 16104 82ND RD N
City-St-Zip: LOXAHATCHEE, FL 33470

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: ANTHONY BUFO

MGRM

04/16/2009

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