


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000004849

1. Entity Name
ISLAND SERVICE, LLC



Principal Place of Business
**228 EIGHTH AVE
 INDIALANTIC, FL 32903**

Mailing Address
**228 EIGHTH AVE
 INDIALANTIC, FL 32903**

DO NOT WRITE IN THIS SPACE



03132006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
65-1213954

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional
 Fee Required

6. Name and Address of Current Registered Agent

**JONES, JERRY G
 228 EIGHTH AVE
 INDIALANTIC, FL 32903**

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-issuing)

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JONES, JERRY 228 EIGHTH AVE INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HENSLEY, JAMES 1745 LARCHMONT CT MERRITT ISLAND, FL 32952
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 05/01/06-80036-015 50.00

**DO NOT WRITE
 IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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: *James Jones* 4/14/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Original Filing Fee