

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # L04000005874

1. Entity Name
MARTIN ISLAND WAY, L.L.C.



Principal Place of Business
7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410

Mailing Address
7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410



02252008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0872421

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHICKEDANZ, W K
7741 N. MILITARY TRAIL, SUITE 1
PALM BEACH GARDENS, FL 33410

**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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000910544
05/07/08-80005-015 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SCHICKEDANZ CAPITAL GROUP, L.L.C.
STREET ADDRESS	7741 N. MILITARY TRAIL, SUITE 1
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410
TITLE	MGRM
NAME	KELLY, GEORGE T IV
STREET ADDRESS	621 SE CENTRAL PARKWAY
CITY-ST-ZIP	STUART, FL 34994
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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: _____

SIGNAT

Waldemar K. Schickedanz, President
Schickedanz Capital Group, LLC
Managing Member, Martin Island Way, LLC

OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/18/08

561 845 8797