2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038690

Entity Name: ISLAND PLAZA CENTER, L.L.C.

FILED Apr 26, 2006 Secretary of State

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

975 N. COLLIER BLVD. 971 N. COLLIER BLVD.

MARCO ISLAND, FL 34145 US MARCO ISLAND, FL 34145 US

Current Mailing Address: New Mailing Address:

975 N. COLLIER BLVD. 971 N. COLLIER BLVD.

MARCO ISLAND, FL 34145 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KARL, JAMES L II

975 N. COLLIER BLVD.

KARL, JAMES L II

971 N. COLLIER BLVD.

MARCO ISLAND, FL 34145 US MARCO ISLAND, FL 34145 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.

ADDITIONS/CHANGES:

SIGNATURE: JAMES L. KARL II 04/26/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Fitle: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 MAGDALENER, JOSEF
 Name:
 MAGDALENER, JOSEF

 Address:
 975 N. COLLIER BLVD.
 Address:
 971 N. COLLIER BLVD.

 City-St-Zip:
 MARCO ISLAND, FL 34145
 City-St-Zip:
 MARCO ISLAND, FL 34145

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:KUBEL, KARLName:KUBEL, KARLAddress:975 N. COLLIER BLVD.Address:971 N. COLLIER BLVD.

City-St-Zip: MARCO ISLAND, FL 34145 City-St-Zip: MARCO ISLAND, FL 34145 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: KARL, JAMES L II Name: KARL, JAMES L II

Name: KARL, JAMES L II

Address: 975 N. COLLIER BLVD.

City-St-Zip: MARCO ISLAND, FL 34145

Name: KARL, JAMES L II

Address: 971 N. COLLIER BLVD.

City-St-Zip: MARCO ISLAND, FL 34145 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:SCHMALZ, OTTOName:SCHMALZ, OTTOAddress:975 N. COLLIER BLVD.Address:971 N. COLLIER BLVD.City-St-Zip:MARCO ISLAND, FL 34145City-St-Zip:MARCO ISLAND, FL 34145 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: JOSEF MAGDALENER MGRM 04/26/2006