2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039407

Entity Name: ISLAND PROPERTIES OF SOUTH FLORIDA, LLC

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:

P.O. BOX 755
BOYNTON BEACH, FL 33425

Current Mailing Address:

New Principal Place of Business:

New Principal Place of Business:

P.O. BOX 755 BOYNTON BEACH, FL 33425

FEI Number: 20-1181382 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

AUERBACH, JAY E ESQ LOWE, KERRY T 2338 HOLLYWOOD BOULEVARD PO BOX 755

HOLLYWOOD, FL 33020 US BOYNTON BEACH, FL 33425 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: KERRY T LOWE 04/27/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 LOWE, KERRY
 Name:

 Address:
 P.O. BOX 755
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33425
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 BURKE, GREGORY
 Name:

 Address:
 P.O. BOX 755
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33425
 City-St-Zip:

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

 Name:
 STANBURY, WAYNE
 Name:
 BURKE, MIRIAM

 Address:
 P.O. BOX 755
 Address:
 PO BOX 755

 City-St-Zip:
 BOYNTON BEACH, FL 33425
 City-St-Zip:
 BOYNTON BEACH, FL 33425

Title: MGRM (X) Delete Title: () Change () Addition Name: BURKE, ROY Name: Address: P.O. BOX 755 Address:

City-St-Zip: BOYNTON BEACH, FL 33425 City-St-Zip:

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

 Name:
 BURKE, MIRIAM
 Name:

 Address:
 P.O. BOX 755
 Address:

 City-St-Zip:
 BOYNTON BEACH, FL 33425
 City-St-Zip:

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: KERRY T LOWE MGR 04/27/2005