

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093624

FILED  
Feb 12, 2006  
Secretary of State

Entity Name: PINE ISLAND PROPERTIES, LLC

## Current Principal Place of Business:

835 S. TOWN AND RIVER DR.  
FORT MYERS, FL 33919

## New Principal Place of Business:

## Current Mailing Address:

835 S. TOWN AND RIVER DR.  
FORT MYERS, FL 33919

## New Mailing Address:

FEI Number: 33-1107349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOTES, JOEL S  
835 S. TOWN AND RIVER DR.  
FORT MYERS, FL 33919 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: MGR ( ) Delete  
Name: NOTES, JOEL S  
Address: 835 S. TOWN AND RIVER DR.  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM ( ) Delete  
Name: NOTES, WANDA C  
Address: 835 S. TOWN AND RIVER DR.  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM ( ) Delete  
Name: NOTES, ABBEY  
Address: 15901 HAMPTON GLEN COURT  
City-St-Zip: MIDLOTHIAN, VA 23832 US

Title: MGRM ( ) Delete  
Name: NOTES, RENEE  
Address: 11541 HICKORY CLUSTER  
City-St-Zip: RESTON, VA 20190 US

## ADDITIONS/CHANGES:

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

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

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

Title: MGRM (X) Change ( ) Addition  
Name: NOTES, RENEE  
Address: 20700 ASHBURN VALLEY COURT  
City-St-Zip: ASHBURN, VA 220147 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: JOEL S. NOTES

MGR

02/12/2006

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