

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000001300

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Entity Name:** ISLAND PUB PROPERTY LLC

**Current Principal Place of Business:**

600 NEAPOLITAN WAY  
UNIT 159  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

600 NEAPOLITAN WAY  
UNIT 159  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 65-1240354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLOCK, TIMOTHY J  
600 NEAPOLITAN WAY  
UNIT 159  
NAPLES, FL 34103 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:** MGRM  
**Name:** FLOCK, TIMOTHY J  
**Address:** 2777 LAKEVIEW DR.  
**City-St-Zip:** NAPLES, FL 34112

**Title:** MGRM  
**Name:** SCHOOLEY, KENT L  
**Address:** 4934 WEST BLVD.  
**City-St-Zip:** NAPLES, FL 34103

**Title:** MGRM  
**Name:** FLOCK, DONALD E  
**Address:** 545 CENTRAL AVE  
**City-St-Zip:** NAPLES, FL 34102

**Title:** MGRM  
**Name:** BRIGGS, STEPHEN F  
**Address:** 107 BROAD AVE. S  
**City-St-Zip:** NAPLES, FL 34102

I hereby 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:** TIMOTHY J FLOCK

MGRM

03/18/2011

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