

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043511

FILED
Apr 30, 2009
Secretary of State

Entity Name: ISLAND PALMS PLANT BROKERAGE, LLC

Current Principal Place of Business:

10395 STATE RD 60
VERO BEACH, FL 32966

New Principal Place of Business:

Current Mailing Address:

10395 STATE RD 60
VERO BEACH, FL 32966

New Mailing Address:

FEI Number: 57-1239420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLAND, KAREN M
10395 STATE ROAD 60
VERO BEACH, FL 32966 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 () Delete
Name: HOLLAND, BEAU W
Address: 10395 SR# 60
City-St-Zip: VERO BEACH, FL 32966 US

Title: MGRM () Delete
Name: LEE, DEMPSEY C II
Address: 306 14 AVE
City-St-Zip: VERO BEACH, FL 32967 US

Title: MGRM (X) Delete
Name: KINGFISHER TRUST
Address: 1030 CREST PARK DR
City-St-Zip: GARLAND, TX 75042 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOLLAND, BEAU W
Address: 10395 STATE ROAD 60
City-St-Zip: VERO BEACH, FL 32966 US

Title: MGRM (X) Change () Addition
Name: KINGFISHER TRUST
Address: 520 SAWMILL CREEK ROAD
City-St-Zip: BRYSON CITY, NC 28713

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

I hereby certify that the information supplied with this filing does not qualify 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: BEAU W. HOLLAND

MGRM

04/30/2009

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